



This work is protected by copyright and other intellectual property rights and duplication or sale of all or part is not permitted, except that material may be duplicated by you for research, private study, criticism/review or educational purposes. Electronic or print copies are for your own personal, non-commercial use and shall not be passed to any other individual. No quotation may be published without proper acknowledgement. For any other use, or to quote extensively from the work, permission must be obtained from the copyright holder/s.

**Child protection decision-making and ethical
engagement: a comparative analysis of
social work practice in England and Finland**

Rachel Falconer

**Thesis submitted for the Degree of Doctor of Philosophy
in Social Work**

October 2019

Keele University

Abstract

The decision to intervene in family life to protect a child necessitates weighing up ethical and legal considerations, a task shaped by the knowledge, skills and personal values of social workers and situated in organisational and local policy contexts. Recent comparative research has improved understanding of how national child protection systems operate, however less is known about how national contextual factors influence decision-making at the practice level. In view of this, this study explores how social workers in two nations, England and Finland, make child protection decisions and engage with ethical issues during this process.

The qualitative study involved interviews with 30 social workers in child protection agencies across England and Finland. Participants were asked to comment on two constructed case vignettes, each of which incorporated an ethical dimension, and were interviewed about their experiences of ethical dilemmas and decision-making in practice.

Similarities were observed in the English and Finnish participants' responses to the vignettes. Ethical engagement was seen to vary at an individual level, although in general participants from both nations focused on presenting risk factors over the ethical aspects of the cases. The participants' narratives further highlighted the significance of support networks in guiding decisions, with differences observed in the nature and extent of support provision across the samples.

The findings demonstrate the importance of decision-making environments, both national and organisational, in shaping child protection decisions. The study's

comparative lens reveals how practice is supported through different mechanisms in different national contexts, yet irrespective of the child protection system in place, support structures seem to be vital in helping social workers to negotiate the ethical complexities of practice. It is argued that strengthening these support structures, while fostering a culture of discussion and reflection, may help organisations to better integrate ethical engagement into everyday work processes.

Table of contents

Abstract	ii
List of tables	ix
Acknowledgements	x
1. Introduction to the Study	1
1.1 Introduction	1
1.2 The focus of the thesis	2
1.3 Beginning the research	9
1.4 Comparing practice in England and Finland	10
1.5 Research aims	16
1.6 Key concepts	17
1.7 Structure of the thesis	21
2. Literature Review	25
2.1 Introduction	25
2.2 Review approach	25
2.3 Decision-making in social work	28
2.3.1 Overview	29
2.3.2 Review of the empirical literature	32
2.4 Social work ethics	44
2.4.1 Overview	45
2.4.2 Review of the empirical literature	49

2.5	Comparative child welfare and child protection	58
2.5.1	Overview	59
2.5.2	Review of the empirical literature	63
2.6	Literature review summary	70
3.	Legislative, Policy and Practice Contexts	74
3.1	Introduction	74
3.2	Child welfare and child protection in England	75
3.2.1	Developments in child protection in England	78
3.2.2	Legislation and policy in England	78
3.2.3	The relationship between families and social workers	81
3.3	Child welfare and child protection in Finland	83
3.3.1	Developments in child protection in Finland	83
3.3.2	Legislation and policy in Finland	86
3.3.3	The relationship between families and social workers	89
4.	Study Design and Methods	93
4.1	Introduction	93
4.2	Research aims	93
4.3	Theoretical orientation and the comparative approach	97
4.4	Methods	104
4.4.1	Sample	104
4.4.2	Sites	106
4.4.3	Data sources	107

4.4.4	Interview procedure	115
4.4.5	Data analysis	121
4.5	Participant characteristics	130
4.5.1	Demographic profile	130
4.5.2	Social work education and experience	133
4.5.3	Questionnaire responses summary	137
4.6	Ethical considerations	138
4.7	Reflections	144
5.	Findings: Vignette Responses	147
5.1	Introduction	147
5.2	Vignette data	147
5.3	Vignette one responses	148
5.3.1	Identified issues or concerns	149
5.3.2	Threshold for intervention	152
5.3.3	First steps in responding to the referral/notification	154
5.3.4	Ethical engagement	158
5.4	Vignette two responses	161
5.4.1	Identified issues or concerns	162
5.4.2	Threshold for intervention	165
5.4.3	First steps in responding to the referral/notification	168
5.4.4	Ethical engagement	172
5.5	Vignette responses summary	176

6.	Findings: Interview Responses	178
6.1	Introduction	178
6.2	Interview responses	179
6.2.1	Responding to new referrals/notifications	179
6.2.2	Deciding how to proceed with cases	181
6.2.3	Support services for children and families	185
6.2.4	Changes in child welfare	190
6.2.5	Experiences of ethical issues	195
6.2.6	Managing ethical dilemmas	202
6.3	Interview responses summary	208
7.	Discussion	210
7.1	Introduction	210
7.2	Comparing approaches to decision-making	212
7.2.1	The role of the decision-maker	212
7.2.2	The role of organisations	215
7.2.3	Risk judgements and the national context	228
7.3	Comparing ethical engagement	231
7.3.1	Risk, procedure and ethics	232
7.3.2	Ethics, human rights and children's best interests	238
7.3.3	Resources and ethical stress	242
7.3.4	Support for ethical decision-making	246
7.4	Summary	249

8.	Conclusion	255
8.1	Introduction	255
8.2	Review of the chapters	255
8.3	Reflections and limitations	257
	8.3.1 Reflections on the research process	257
	8.3.2 Reflections on the research aims and findings	263
8.4	Contribution of the study	269
	8.4.1 The role of support networks in shaping decisions	271
	8.4.2 Risk prioritisation and ethical engagement	273
	8.4.3 Ethical engagement from a comparative perspective	277
8.5	Implications for practice	280
	8.5.1 Strengthening support networks	280
	8.5.2 Sharing knowledge and practice expertise	282
	8.5.3 Promoting ethical reflection	284
	References	287
Appendix 1	Empirical literature search	309
Appendix 2	Confirmation of ethical approval	314
Appendix 3	Interview invitation (covering letter)	317
Appendix 4	Interview invitation (study abstract)	319
Appendix 5	Study information sheet (for agencies)	321
Appendix 6	Study information sheet (for participants)	324
Appendix 7	Consent form (for participation in the study)	330

Appendix 8	Consent form (for use of quotes)	332
Appendix 9	Questionnaire	334
Appendix 10	Case vignettes	336
Appendix 11	Interview guide	339

List of tables

Table 1	Characteristics of child protection system orientations	61
Table 2	Age and gender profile of participants	132
Table 3	Education and experience profile	136
Table 4	Support services referred to by participants	188

Acknowledgements

This thesis would not have been possible without the contribution and support of a number of people. First, I would like to thank all of the practitioners who participated in the study and took time out of their day to share their experiences. Thank you to those in the participating agencies who supported the research, and in particular, thank you to Professor Riitta Vornanen, Janissa Miettinen and colleagues at the University of Eastern Finland for your warmth, advice and generous support.

Thank you to my supervisors, Professor Steven M Shardlow and Dr Emma Head for your encouragement, insight and excellent guidance throughout my PhD journey.

Thank you to friends from Keele University and Warwick, including Ria, Adam, Freya and Karl for making the past few years so enjoyable. Thank you to my family and parents for being there, and to Rob for your advice, reassurance and ongoing support. I couldn't have done this without you all.

Chapter One

Introduction to the Study

1.1 Introduction

This thesis presents a comparative study of how child protection social workers in England and Finland make decisions and engage with ethical issues and dilemmas during this process. Child protection social work is commonly described as a challenging area of practice due to its dual mandate of care and control, which can necessitate actions perceived as intrusive or unjustified by parents, many of whom may be experiencing deprivation and hardship, to ensure children's safety (Featherstone, Morris, & White, 2014). In many contexts this complex task also takes place in an environment of organisational resource shortages, public and media pressure and increased expectation that social workers should be making the 'right' decisions in all cases (Munro, 1996). However, in view of growing evidence of cognitive bias and the unreliability of human decision-making (Kahneman, 2012), in this thesis I argue that more attention should be paid to the role played by social workers' contextual environments in guiding decisions, and in helping practitioners to navigate the ethical complexities of their work.

Alongside research concerning social work decision-making, a separate body of research has grown since the 1990s comparing international child protection systems in response to claims, particularly in North America and the UK, that their respective systems for child protection were facing 'crisis' (Stafford, Vincent, Parton, & Smith, 2012). Early research from this period, such as the cross-national comparison of the English and French child protection

systems by Cooper, Freund, Grevot, Hetherington, and Pitts (1992), helped to stimulate debate and inspired subsequent studies, including the seminal nine-country analysis and resulting child protection system typology developed by Neil Gilbert and colleagues (Gilbert, 1997), which forms a particular focus of this thesis. In Gilbert's analysis, key differences were observed in how three English-speaking nations constructed and responded to the problems of child abuse and neglect when compared to six Continental and Northern European countries. Such studies have improved understanding of how contrasting systems of child protection appear to operate at the state level; however, the focus on legal and administrative processes, and national trends in interventions, has arguably provided limited insight into the mechanisms by which contextual factors influence social workers' decisions and ethical deliberation at the practice level.

1.2 The focus of the thesis

The study discussed in this thesis is based on empirical research involving interviews with 30 child protection social workers in sites across England and Finland. This research strategy was chosen to allow participants the opportunity to describe the factors that impact on their everyday decision-making and the extent to which they experience, and are influenced by ethical challenges, during this process. The first stage of each interview was structured around two vignettes of hypothetical child protection referrals, which enabled a comparison of how participants in the two national samples considered the referrals and made judgements and decisions on how to proceed. In the second stage of the interview, participants were further questioned about their experiences of ethical dilemmas in practice. In view of the currently limited cross-national literature on social

work ethics and ethical deliberation, this comparative perspective offers a valuable contribution to existing research.

A number of key themes are explored within the thesis, inspired by a review of existing research on social work ethics and decision-making and the findings of the empirical study described above. The first broad theme concerns the factors that impact on social workers' processes of decision-making in different national contexts. This theme was examined to explore if and how the wider child protection system influences social workers' judgements and decisions; if national systems can be shown to have an impact on individuals' decision processing, then can systems be improved to support more effective and ethical decisions? Literature and empirical evidence has been examined throughout the thesis to explore the relative influence of:

- i) Individual level-factors on decision-making; specifically the significance of analytical reasoning compared to intuitive reasoning approaches, and the role of individual biases, personal values, professional experience and 'practice wisdom' within this.
- ii) Organisational-level factors on decision-making; specifically the role of organisational cultures, policies and procedures, supervision structures and workload pressures, and;
- iii) National-level factors on decision-making; including the role of national legislation and policy (and the interaction with regional and local-level policies), as well as national debates around risk, and philosophical debates regarding the extent to which the state can or should intervene in family life.

A second broad theme examined within the thesis concerns the factors that influence if and how social workers' engage with ethical issues when making decisions in different national contexts. I have addressed this theme to explore how social workers in different contexts respond to the ethical complexities of child protection work, and whether national child protection systems have any influence on social workers' engagement with ethical ideas and concepts when making decisions. Literature and empirical evidence on the below sub-themes has been examined, as I have attempted to explore the relative influence of:

- i) Individual-level factors on ethical engagement; this includes the impact of individuals' knowledge and awareness of ethical theories and concepts, the role of personal ethical hierarchies, and the extent to which individuals engage in what Sarah Banks (2016) has described as 'ethics work'.
- ii) Organisational and national-level factors in shaping the nature of the ethical issues encountered; for example, how national and organisational contexts influence social workers' encounters with ethical issues and experiences of 'ethical stress'; and
- iii) Organisational and national-level factors in supporting ethical reflection; specifically, the presence of organisational support systems, opportunities for ethical discussion and debate, and the role of national codes of ethics in guiding deliberation and ethical decision-making.

As the above outline demonstrates, questions concerning the relative impact of different structural influences on ethical engagement and decision-making, be that individual, organisational or national, form a central focus of the thesis as I investigate what drives practice 'on the ground' in two contrasting European contexts.

Additionally, the above issues have been examined in relation to six emergent themes which were derived through original empirical analysis of the interview data. These themes – explored in greater detail in chapter seven – relate to the concepts of *risk*, *procedure* and *support*, which appeared to be significant in shaping how the participants approached their decisions, alongside *human rights*, *best interests* and *resources*, which were topics discussed throughout the participants’ accounts of the ethical issues and dilemmas they experienced in child protection social work.

Moreover, due to my particular interest in the drivers of ethical engagement and ethical decision-making, it is relevant to highlight early in the thesis that English and Finnish social workers are regulated by national professional bodies, with different professional codes and ethical guidelines to which social workers in each country must conform. In England, social workers are presently (until December 2019) required to register with the regulatory body the Health and Care Professions Council (HCPC), and are subject to both the HCPC’s standards of proficiency for social workers in England (Health and Care Professions Council, 2017), and standards of conduct, performance and ethics (Health and Care Professions Council, 2016). Additionally, around a fifth to a quarter of social workers in England are members of the British Association of Social Workers (BASW) (see Weiss-Gal & Welbourne, 2008, p. 287), and so are also subject to this professional association’s separate code of ethics (British Association of Social Workers, 2014). In Finland social workers are required to register with the professional regulatory body *Sosiaali- ja terveystieteiden lupa- ja valvontavirasto*, or the National Supervisory Authority for Welfare and Health (Valvira) (Valvira, n.d.), which grants qualified social workers the right to

practice as a licensed social welfare professional. Given the relatively high levels of trade union membership in Finland compared to other countries, the majority of social workers are also members of *Sosiaalialan korkeakoulutettujen ammattijärjestö Talentia ry*, or the Talentia Union of Professional Social Workers (Talentia, n.d.). This organisation has developed its own ethical guidelines for social workers, which members are obliged to follow (Talentia, 2017).

Despite these differing ethical codes and guidelines for social workers in England and Finland, all of the documents described above share similarities with the International Federation of Social Workers' (IFSW) global statement of ethical principles (International Federation of Social Workers, 2018), which includes an explicit commitment to human rights and human dignity, social justice and non-discrimination. While this common ethical framework assists the direct comparison of English and Finnish social workers' engagement with ethical ideas and concepts, it is relevant to note that some have questioned the practical value of such codes in helping social workers' to reconcile ethical dilemmas in everyday practice. For example, Clark (1999) has highlighted that certain principles within ethical codes may be liable to conflict, such as the requirement for confidentiality with the need to protect those at risk of harm. Ultimately, Clark (1999, p. 259) argues that professional codes in social work may be "likened to the function of the lighthouse: to serve as a point of reference and warning of danger, but not to work out one's course or one's destination". Within the thesis this issue, and the significance of national ethical codes as drivers of ethical engagement in England and Finland, will be explored in greater depth.

The contribution of the thesis

Overall, the results of the empirical study discussed in this thesis revealed similarities in how the English and Finnish social workers approached their decisions when considering the two case vignettes. Indeed, a key finding is the fact that participants from both samples tended to focus their discussion on presenting risk factors over the ethical aspects of the cases. This would suggest that the national context played a limited role in shaping the participants' ethical engagement and reflection when considering the scenarios portrayed in the vignettes. Ethical engagement instead appeared to be influenced mainly by individual-level factors, with some participants deliberating on ethical concepts more explicitly and in greater depth than others. Despite this variation, however, certain 'core' ethical issues were mentioned repeatedly by participants across both national samples, in particular, the challenge of balancing service users' right to self-determination with children's long-term best interests.

Another significant finding of the study concerns the fact that, though participants from both samples largely focused on risk factors when considering the two vignettes, differences were noted in the English and Finnish participants' sensitivities to *particular* risk factors. This suggests that national-level risk narratives may be influential in shaping social workers' sensitivity to and awareness of certain risk issues, to the extent that a heightened focus on particular risk factors, possibly due to processes such as 'availability bias' (Kirkman & Melrose, 2014), may be contributing to a shift in focus away from other considerations, including the ethical complexities of decisions.

A final key finding concerns the support provision for decision-making described by participants. In England, participants predominantly described a 'top-down', supervised form of managerial support, while in Finland participants

described a more team-based and supported decision-making approach. This suggests that different decision-making cultures can exist within social work organisations, influenced by the national contextual environment. However, as the critical importance of support was evident across the two national samples, in this thesis I argue that there may be scope to strengthen the support structures available to social workers in both England and Finland, and potentially elsewhere, with a view to facilitating opportunities for ethical reflection, alleviating isolation and ultimately improving practice decisions.

Based on the analysis of these themes and their juxtaposition, I go on to argue that academic debates on social work ethics need to acknowledge the environment within which ethical decisions are made in real-world practice, and crucially, the importance of organisational structures and group decision-making processes; a point also noted by Saario, Räsänen, Raitakari, Banks, and Juhila (2018), who explored the performance of ‘ethics work’ in multi-disciplinary decision-making meetings in England and Finland. In view of the differing levels of ethical engagement practiced by individual social workers, observed in this study, I argue that more explicit and mindful ethical reflection should be promoted across all levels of child protection systems. Social workers individually should be encouraged to engage in ethics work and conscious ethical reflection when working with families in all cases, and this should be seen as a key practice skill. Social workers should also be supported by their employing organisations to share and discuss ethical concerns with those within their support network, rather than suppress their concerns or focus too narrowly on risk issues. Potentially, this could help to reduce feelings of ethical stress and isolation currently reported by many child welfare social workers (Mänttari-van der Kuip, 2016). Furthermore, at

the national and international level, greater knowledge exchange could help to facilitate learning by presenting new perspectives on issues, and by helping to promote reflection and critique of domestic practice approaches. This process of sharing practice expertise cross-nationally could be especially beneficial given continued cultural and philosophical differences in national approaches to child protection; a topic which is further explored in the discussion and conclusion chapters of the thesis.

1.3 Beginning the research

My decision to conduct this research study stemmed from my social work experience within a child protection team in England. Prior to beginning my social work training, I had worked as a policy intern for the Children and Family Court Advisory and Support Service (Cafcass) and there developed an academic interest in child protection and the family court process. Though this experience was invaluable, the knowledge did not prepare me for the realities of work in a statutory child protection team. Throughout my time with the team I was deeply affected by the emotional demands of the role and the significant ethical consequences of the decisions social workers were required to make, particularly when working with families on a non-consensual basis. I was also troubled by the increase in national and local funding cuts to preventative support services, when at the same time the government was pushing for an increase in the number of adoptions (Department for Education, 2012). In addition, I was struck by the public climate and the level of risk involved should the ‘wrong’ decision be made; the local authority where I completed some of my training was at the time

managing the aftermath of a high profile serious case review, which had attracted national media coverage.

These experiences led me to question how other social workers handle the responsibilities and challenges of the child protection role, and I reflected on whether the practice environment in England added to these pressures. My understanding of social policy in other countries also influenced my thinking, as prior to beginning my social work training I had studied geography and social policy at undergraduate and postgraduate level. Through this, I had developed an interest in how other countries structure their welfare systems and respond to shared social challenges. These combined factors motivated me to learn more about how child protection social work is approached internationally, and led me to question how other societies organise and manage their systems of child welfare and child protection. Are some systems more conducive to helping social workers navigate the ethical complexities of the work? These were some of the broad questions that guided me as I began the project.

1.4 Comparing practice in England and Finland

My decision to compare practice in England and Finland specifically was influenced in part by my awareness of the two nations' contrasting approaches to welfare provision, alongside practical considerations, including access to translation support and research sites.

During my time working in child protection in England I had developed some anecdotal (and admittedly simplistic) explanations for the likely causes of ethical stress experienced by many of the social workers I worked alongside.

Resource constraints, and a lack of human resources in particular, appeared to be among the most significant factors; it seemed that social workers were tasked with juggling the complex needs of multiple families without sufficient time to fully understand their needs, or the resources to arrange meaningful forms of support. Though similar observations had been made previously by other researchers (Broadhurst et al., 2010), as a newly qualified social worker, the reality of practice stood in stark contrast to the content of my ethics and values-focused social work education. To me, it appeared that social workers were not being given the time or space to reflect on the complex ethical dilemmas they were faced with, nor did statutory guidance encourage them to reflect on such matters. The core guidance for child protection in place at the time, *Working Together to Safeguard Children* (HM Government, 2013), made no reference to ethics, values or related concepts anywhere in the document, and in updated editions of the guidance there has been a similar absence of ethical language (HM Government, 2015, 2018b).

I contrasted these observations with my knowledge of public service provision in other welfare systems, including the ‘Scandinavian’ social democratic system (Esping-Andersen, 1990), with its more universalistic approach to welfare and family policy. I speculated on whether social workers employed in such systems may be afforded greater access to resources, more options for preventative support and, due to the lower levels of relative and absolute poverty in these nations, fewer cases per worker. If this was found to be the case, I reflected on whether the levels of ethical stress among Scandinavian and Nordic social workers may be lower than in England. In view of the growing political focus on child protection reform in England, amid increasing austerity measures, I judged that the comparison between England and a Scandinavian or

Nordic country could provide a particularly useful illustrative example of different policy approaches.

A further reason for my decision to compare practice in England and Finland specifically stemmed from collaborative links between Keele University and the University of Eastern Finland, including the professional relationship between my supervisor, Professor Steven M Shardlow and staff in the University of Eastern Finland's Department of Social Work. My Finnish colleagues in Kuopio provided a significant level of support for my research for which I am deeply grateful, as without this support I doubt I could have completed this study. The opportunity to conduct my Finnish fieldwork through Erasmus+ funding was another important factor, and the scheduling of my fieldwork, less than two months after the UK's referendum decision to leave the European Union, proved to be a thought-provoking time to work alongside staff and students from across the continent.

While my interest in the differences between English and Finnish approaches to child welfare originally sparked my interest in this study, as I began to read around the subject I became more aware of the wider context of child protection policy in each nation, and began to question how these differing contextual environments may be affecting how social workers make decisions and manage ethical issues in practice.

Three studies in particular informed my thinking at the early stage of the project. First, the comparison of Finnish *lastensuojelu* and English child protection practices by Hearn, Pösö, Smith, White, and Korpinen (2004) explored the historical trends which had shaped contemporary child protection policy and practice in each country. The authors considered, for example, how changes to

welfare policy in England during the 1980s had shifted public attitudes towards welfare provision, while in Finland, despite a deep recession during the 1990s, the recent modernisation of its welfare system occurred “through a more social democratic form than the British case” (Hearn et al., 2004, p. 31). The authors also noted important differences in approaches to professional social work; for example, it was noted that the discretion of English social workers had been “curtailed through intensification of formal monitoring”, while in Finland it was suggested that social workers receive “a fair amount of discretionary power” (Hearn et al., 2004, pp. 33-37). From this analysis, it appeared the decision-making authority of individual social workers in England and Finland differed greatly. Within my own research, I wanted to explore if this was still the case, and if so, how this impacted on social workers’ judgements and engagement with ethical issues.

Two further studies also shaped my early understanding of the wider policy contexts in England and Finland: the two sequential comparative analyses of international child protection systems by Neil Gilbert and colleagues (Gilbert, 1997; Gilbert, Parton, & Skivenes, 2011b). Within these studies, the authors developed a typology for understanding the characteristics of, and overall orientation of different child protection systems, based on four key elements: how the problem of child abuse is framed on a cultural level (that is, as an individual or societal problem); how the state should intervene in such cases (for example, by investigating allegations of harm or assessing families’ unmet needs); the nature of the state/parent relationships (whether adversarial or based upon partnership and trust), and whether children should be removed from their birth parents on a voluntary or involuntary basis. In Gilbert’s (1997) first analysis, England and

Finland were regarded as belonging to contrasting system orientations, with England's system described as adversarial, legalistic and 'child protection-orientated'; while Finland's system was characterised as 'family service-orientated', based on preventative support and greater partnership with families.

When beginning the research, the above characterisations broadly confirmed my assumptions about English and Finnish approaches to child protection. However, after reading the later analysis by Gilbert et al. (2011b), I became aware of signs of convergence between the two systems. In particular, it was suggested that Finland's system had become more proceduralised – and similar to England's system - following implementation of the Child Welfare Act 2007. Similarly, there were claims that England's system had moved more closely towards the Finnish model following increased investment in family support during the late 1990s and 2000s. Within the analysis, it was also suggested that both England and Finland (and other nations) had begun to converge towards a new 'child-focused' orientation, in part as a result of a wider recognition of children's rights following ratification of the United Nations Convention on the Rights of the Child (1989).

During this early stage of the research I was intrigued by these accounts of similarities and differences between the two systems, and wanted to explore if the claim by Gilbert et al. (2011b) – that the English and Finnish systems were converging towards one another – was accurate. I also wanted to explore how recent changes to the respective child protection systems were affecting the way social workers make decisions and manage ethical dilemmas in practice, particularly when considering complex issues such as mandatory intervention or child removal.

The timing of this research project also proved advantageous as key reforms to social work with children and families were in development in both the English and Finnish contexts. In England, local authorities were implementing several of the changes recommended in Eileen Munro's (2011) high profile review of child protection, most notably, a reduction in the bureaucracy of many social work processes. More broadly however, the Conservative government's approach to children and families social work appeared to be shifting in normative focus, becoming less preventative and *more* child protection-orientated, in contrast to the analysis by Gilbert et al. (2011b). According to the authoritative account of Nigel Parton:

...while the range and level of universal and secondary prevention benefits and services have been reduced [since 2010], the role of the state in other areas has become more authoritarian and much more willing to intervene in certain families with the full weight of the law behind it. (Parton, 2014b, p. 2052).

Similarly in Finland, there too had been increased debate regarding the sustainability of its welfare policies, despite the country's historic association with the social democratic welfare model (Satka, Harrikari, Hoikkala, & Pekkarinen, 2007). For instance, successive governments had developed substantial proposals for social and healthcare reform, known as *Social- och hälsovårdsreformen* or SOTE, which aimed to transfer responsibilities for healthcare and social services from individual municipal districts to larger administrative areas, with the aim of increasing efficiency (Kalliomaa-Puha & Kangas, 2016). Additional reforms aimed at reorganising child and family services specifically, known as *Lapsi- ja perhepalvelujen muutosohjelma* or LAPE, also sought to increase the cost-

effectiveness of social work interventions while reducing the need for expensive ‘remedial’ services (Ministry of Social Affairs and Health, 2016, p. 2). In view of these reforms and wider policy shifts taking place in England and Finland, I considered that this research would be a timely addition to current knowledge and could help to support reflection and debate on the direction and progress of reform in both nations.

1.5 Research aims

The motivation to learn more about practice approaches in England and Finland was strengthened as I read around the subject in more depth, and this academic perspective helped to inform the central research question for this comparative study: how do child protection social workers in England and Finland make decisions and engage with ethics during this process?

As the bodies of literature concerning social work ethics and social work decision-making appeared to vary in theoretical and empirical focus, I chose to explore the two subjects separately at first, and then concentrated my overall enquiry on four interconnected research aims:

1. To gain an understanding of how child protection social workers in England and Finland approach decision-making.
2. To gain an understanding of how child protection social workers in England and Finland engage with ethics.
3. To compare data from England and Finland in respect of aims 1 and 2, to identify if there are similarities and/or differences between the samples.

4. To reflect on possible explanations for any identified similarities and/or differences between the English and Finnish data.

The research aims were designed to be exploratory in nature, as I sought to gain a greater insight into the features and characteristics of decision-making and ethical engagement in the two contexts, and to reflect on any trends or patterns across and within the national samples. I also aimed to consider possible explanations for any such observations, informed by a review of existing literature. The intention here was not to identify cause-and-effect relationships but to offer tentative propositions and to identify possible areas for further research. This approach was used to assist the development of emergent generalisations as a step to theory building, so important for the exploratory research process (Stebbins, 2001).

1.6 Key concepts

A key challenge associated with carrying out comparative research, and in particular, research that crosses linguistic boundaries, relates to terminology and the difficulty of ensuring shared understanding. As noted by Pösö (2014), processes of translation may effectively transform knowledge and the meaning of concepts for some audiences, and this can be especially problematic when direct translations for terms are unavailable. In acknowledgement of this issue, the following section outlines how key concepts have been understood within the thesis.

Child protection and child welfare

The terms ‘child protection’ and ‘child welfare’ are used throughout the thesis, at times interchangeably. Both terms have been understood broadly with large areas of overlap, in recognition of the difficulties of translating the English term ‘child protection’ into Finnish, and vice versa. The most appropriate term in the Finnish language, *lastensuojelu*, is frequently translated as ‘child welfare’ in English, and not as ‘child protection’. This specific translation difficulty is discussed at length by Hearn et al. (2004), who highlighted the importance of identifying how terms are understood in their specific national and linguistic contexts, as influenced by historical change and the development of state intervention in family life more broadly.

In the English context the terms ‘child protection’ and ‘child welfare’ do have different meanings, with ‘child protection’ more commonly used to describe forms of compulsory intervention, such as ‘child protection plans’, employed in response to identified or suspected significant harm as defined by the Children Act 1989 (Rogowski, 2015). In contrast, ‘child welfare’ in the English context has historically been used to describe more preventative, non-compulsory measures. According to Otway (1996, p. 154), as part of the philosophy of welfarism more broadly, ‘child welfare’ describes a practice approach associated with “a supportive social mandate [with] beneficial and sympathetic involvement with the family... so enabling the state and the family to work in partnership.” Under the New Labour government between 1997 and 2010, a further term, ‘safeguarding’, grew in popularity as part of a broader shift towards early intervention and risk identification in children’s social work. The term ‘safeguarding’ did not feature heavily outside of UK policy and practice debates however, and the term was

largely replaced in UK policy narratives, once again by ‘child protection’, following a change of government in 2010 (Parton, 2011).

In Finland, such distinction between the terms ‘child welfare’ and ‘child protection’ does not exist in the same way; instead the Finnish term *lastensuojelu* has both a broad and narrow meaning, describing “all statutory services provided to protect children from abuse and neglect... [and] all services and benefits that exist for the benefit of children and families with children” (Pösö, 2014, p. 617). Compounding this translation challenge, as the above example of ‘safeguarding’ illustrates, terminology can shift in popularity and meaning over time as a consequence of changing political narratives (Otway, 1996; Parton, 2011; Rogowski, 2015). For all of these reasons, in this study I have opted to use both the terms ‘child protection’ and ‘child welfare’ where deemed most appropriate to the thesis discussion. This is while acknowledging the various nuances attached to the two concepts.

Comparative research

Within this thesis I have used the term ‘comparative research’ to describe cross-national research specifically; that is, any research comparing policy or practice in two or more nations or countries. This distinction is relevant given the term ‘comparative’ could logically be used to compare practice across different historical periods, or different regions or agencies within the same jurisdiction (Shardlow & Hämäläinen, 2015).

In their analysis of child protection systems in the UK, Stafford et al. (2012) built on the definition of comparative research proposed by Freeman (2008, p. 505), who saw comparison as “an active process, socially shaped and

informed, which constructs relationships of similarity and difference between things, or more precisely representations of things”. In this study, I have adopted a similar perspective when approaching my comparison. Regarding the purpose of comparison more widely, Stafford et al. (2012) have suggested that cross-national, comparative research can serve two purposes. First, the research can evaluate what types of services and systems appear to be most effective in different contexts. Second, the research can serve to explain how and why systems and policies have developed in the way they have in different localities. As regards comparative research in social work specifically, studies may focus on social work in the context of broader welfare systems and social policy; the social work profession itself, including education/training; or how social work is practiced at the organisational and individual level (Meeuwisse & Sward, 2007). There are strengths and limitations associated with each of these areas of focus, however for the purpose of this study, the focus will mainly be on comparing social work practice in sites across England and Finland.

Ethics

The concept of ethics has been subject to extensive debate over time and remains contested (Furrow, 2005). Within this thesis, when I refer to ethics I am referring to social work ethics specifically, encompassing the broad application of philosophical and theoretical ethical debates to the activity of social work, down to the narrow, more prescriptive focus on ethical codes, describing how individual social workers should act to comply with the requirements of their professional regulator. This broad interpretation is in recognition of the view that social work ethics as a concept, and related terms such as values, are imprecise and lack

agreed definitions (Timms, 1983). Moreover, different interpretations of what constitutes ethical behaviour in social work exist across nationalities and cultures, as well as at an individual level (Hugman, 2012). In view of this, for the purpose of this study I chose not to define ethics in any explicit way, as I wanted to gain an understanding of how my participants conceptualised ethics and ethical issues, to explore whether differences or similarities existed between the English and Finnish participants' understandings. However, as is discussed further in chapter four, I utilised the International Federation of Social Workers (IFSW) and International Association of Schools of Social Work's (IASSW) 2012 *Statement of Ethical Principles*¹ as a pragmatic tool to assist my data analysis, in view of its internationally recognised status. This was while accepting that different perspectives on the IFSW/IASSW Statement, and social work ethics more broadly, do exist (Hugman & Bowles, 2012). As regards my use of the specific term 'ethical engagement' throughout this thesis, here I am referring to the extent to which social workers meaningfully connect ethical ideas and concepts to their practice decisions; for example, through the articulation of ethical ideas and concepts and use of 'ethics talk' (Banks & Williams, 2005, p. 1010).

1.7 Structure of the thesis

This thesis consists of eight chapters, the first of which, the introduction, has outlined my motivation for undertaking this study, my rationale for comparing

¹ During the process of completing this thesis, the IFSW/IASSW's 2012 *Statement of Ethical Principles* was updated and replaced by the IFSW's (2018) *Statement of Ethical Principles: Social Work*. Many aspects of the statement remained the same, however, and as such I did not judge it necessary to repeat my completed data analysis. An overview of the changes to the statement can be found in the document: *Draft Statement of Ethical Principles* (IASSW & IFSW, 2017), published in November 2017.

practice in England and Finland specifically, the study aims and key concepts discussed within the thesis.

Chapter two presents a review of existing literature and empirical research relating to three broad subjects: decision-making in social work; social work ethics; and comparative child welfare and child protection research, with particular reference to practice in either England and/or Finland. From this review, three areas for further exploration were identified. They concerned the possible convergence of practice approaches in England and Finland; the apparent influence of social workers' contextual environments on their decision-making; and the limited empirical evidence regarding the influence of contextual factors on ethical deliberation. Each of these areas for exploration helped to shape the research design of the study, outlined further in chapter four.

Prior to outlining the research design, chapter three of the thesis provides an overview of the research sites, and offers contextual information about the legislative and policy frameworks surrounding child welfare and child protection in England and Finland respectively. This chapter helps to situate the study by exploring the evolutionary development of policy and practice in the two nations and offers a 'diachronic' comparative account of historical trends (Hämäläinen, 2014), to complement the 'synchronic' analysis of current practice explored through the analysis of empirical data later in the thesis.

Chapter four then outlines the study design and methods, describing the development of the research aims and theoretical approach in more depth. Following this, I discuss specific aspects of the research process, including participant recruitment and the selection of research sites, the methods of data collection and analysis and ethical considerations. Details of the participants'

demographic background, education and professional experience are also discussed.

The findings of the study are then presented in chapters five and six. Chapter five presents findings relating to the participants' responses to the case vignettes, including the issues participants' identified within the two cases and how the participants reported they would respond in practice. Chapter six presents findings relating to the participants' subsequent interview responses, focusing on decision-making processes, service availability and practice change, in addition to the participants' experiences of ethical issues and strategies for responding to ethical dilemmas in their practice.

Chapter seven, the discussion chapter, considers the above findings in respect of research aims one and two respectively, exploring the themes of *risk*, *procedure* and *support*, all of which appeared to influence the participants' processes of decision-making, followed by the themes of *human rights*, *best interests* and *resources*, which largely shaped the participants' ethical considerations. Throughout this discussion, in this chapter I also consider how data from the two national samples compared and reflect on tentative explanations for identified differences and similarities across the samples, including apparent drivers of practice acting at the individual, organisational and national levels.

Finally, in chapter eight, I draw together the above discussion and offer my overall conclusions. The chapter includes reflections on the study's limitations and the challenges of undertaking comparative research, before outlining the study's substantive contribution. This contribution includes, first, the development of theoretical and empirical debates on social work decision-making, specifically regarding the role of national and organisational factors in shaping practice

support networks. Second, the critique of existing child protection system typologies, based on the observation that across both the English and Finnish systems, participants appeared to demonstrate largely risk-orientated practice when assessing the case vignettes. Third, the new insights into how social workers conceptualise and engage with ethical issues from a comparative perspective. The implications for social work practice in England, Finland and beyond are also explored.

Chapter Two

Literature Review

2.1 Introduction

In the previous chapter I outlined the central research question guiding the study: how do child protection social workers in England and Finland make decisions and engage with ethics during this process? In view of this question, in this chapter I consider what existing research can tell us about child protection decision-making and ethics from a comparative perspective. The aim of this chapter is to explore and synthesise research evidence relating to three broad subject areas: social work judgement and decision-making; social work ethics; and comparative research on child welfare and child protection, with specific reference to practice in England and Finland.

2.2 Review approach

My review of the research literature was broadly narrative in approach with some systematic elements. Theoretical texts were largely identified through bibliographic searches and reference harvesting, while empirical literature was identified primarily through methods adapted from the Evidence for Policy and Practice Information and Co-ordinating Centre (EPPI-Centre). This approach involved undertaking a scoping review, developing a systematic review protocol, screening studies against set inclusion and exclusion criteria, appraising studies and synthesising study findings (EPPI-Centre, 2010).

After completing an initial scoping review of the three subject areas outlined above, I developed a review protocol which included structured research questions and methods for systematically identifying relevant literature (see Appendix 1). Boolean search terms were developed specific to each subject area based on keywords identified during the scoping review. Multiple electronic databases relevant to social welfare and social work were searched, including: Applied Social Sciences Index and Abstracts (ASSIA); International Bibliography of the Social Sciences (IBSS); Social Services Abstracts; Sociological Abstracts; AgeLine; CINAHL; Academic Search Complete; ISI Web of Science; Social Care Online; Cochrane Library; and the Campbell Collaboration Library. Inclusion and exclusion criteria were then applied to the results in accordance with the *PICO* approach (Cherry, Perkins, Dickson, & Boland, 2013), through which studies are included or excluded based on their *Population*, phenomena of *Interest* and the *Context* of the study (see Appendix 1). As I am not fluent in Finnish, the search was restricted to English language texts only, which may have resulted in some bias towards Anglo-Saxon perspectives over alternative accounts. Another limitation of the search approach was the fact that Finnish language texts were excluded from the review despite their likely contribution to the analysis, and of the remaining texts included, it is possible that the translation of some terms from Finnish to English could have affected some of the meaning or nuance of the discussion (Hearn et al., 2004; Pösö, 2014). Despite these issues, my search approach still produced a large number of relevant, high-quality English language results, including studies from many non-English speaking countries. For example, relevant studies from Finland, Sweden and Denmark were found in journals including the *European Journal of Social Work*, *Nordic Social Work Research* and the *International Journal of Social Welfare*. In part, it is likely that

my literature search was assisted by a growing pressure and expectation for academics from non-English speaking nations to publish in English, a trend discussed further by Tarja Pösö (2014, p. 617), who has described English as the “the lingua franca of the present academic communities”.

After applying inclusion and exclusion criteria, quality appraisal was then conducted informed by Gough’s (2007) *Weight of Evidence* framework and the *TAPUPAS* dimensions proposed by Pawson, Boaz, Grayson, Long, and Barnes (2013), which refer to the Transparency; Accuracy; Purposivity; Utility; Propriety; Accessibility and the Specificity of the research study under consideration.

Overall, the process of undertaking the systematic phase of literature review proved challenging as a small number of empirical studies that were known to be relevant were not identified within the database search; this suggested that other relevant studies could have been missed. Criticisms have been raised about the performance of electronic databases for identifying social work literature (McGinn, Taylor, McColgan, & McQuilkan, 2016), while other writers have questioned the use of systematic reviews in social work research more broadly, in the context of debates surrounding the appropriateness of the evidence-based practice agenda (Glasby & Beresford, 2006; Gray, Plath, & Webb, 2009). In view of this, when conducting the final literature review I utilised both systematic and narrative methods. The narrative methods I adopted included ‘snowballing’, that is, “finding all the work by a published author and checking their reference lists” (Kelly, 2015, p. 82) and hand-searching key journals, known as ‘reference harvesting’. This mixed approach allowed me to identify a large number of empirical studies through rigorous systematic methods, but I added to

this evidence throughout the course of the project using the more traditional narrative review techniques described above. This allowed me to capture theoretical and non-empirical sources, grey literature and relevant studies missed from database searches. The remaining sections of this chapter report on the findings and conclusions of this comprehensive literature search.

2.3 Decision-making in social work

The following section of this chapter introduces some of the key authors and theoretical debates associated with the subject of social work decision-making. Following this, section 2.3.2 of the chapter reviews relevant empirical research surrounding social work decision-making, and focuses on three core areas of discussion: i) evidence of if and how individual/decision-maker factors influence social work decisions; ii) evidence of if and how environmental and organisational factors influence social work decisions; and iii) evidence relating to decision outcomes in child welfare and child protection practice. The key findings of this section of the review, discussed in section 2.6, suggest that social workers' decisions appear to be influenced by a combination of factual and intuitive inputs. Processes of analytical and intuitive deliberation also appear to be influenced by external, as well as individual factors. This could suggest that the different environmental contexts of England and Finland may affect social workers' decision-making processes, and could help to explain why previous studies (Berridge, 1997; Gilbert, 1997) have identified more risk-averse decision-making practices in the English context.

2.3.1 Overview

Decision-making is a core activity in professional social work and has become a growing area of social work research. Much of this research views decision-making as a process rather than a singular action; for example, Taylor and Devine (1993) have suggested that professional decision-making involves four distinct stages, including assessment, planning, implementation and evaluation. The process of decision-making should also be seen as distinct from, but related to, professional judgement, as decision-making involves selecting a course of action *after* gathering and analysing information in order to form a judgement (Taylor, 2017).

The subject of decision-making in child protection specifically has received increased attention from policy-makers in recent years (Kirkman & Melrose, 2014). The work of Eileen Munro, including her analysis of the difficulties of assessing risk, has been particularly influential. In this work, Munro (2004b) stressed the need to understand more about the likelihood of producing ‘false positives’, where a situation is inappropriately assessed as high risk, and ‘false negatives’, where a dangerous situation is judged to be safe, and how this knowledge can be used to improve decision-making processes in child protection. Munro’s (2008) work has also differentiated between intuitive and analytic approaches to decision-making; that is, automatic reasoning based on ‘gut feelings’, personal experience and tacit knowledge, contrasted with formal reasoning, based on the controlled and explicit evaluation of available information. Munro has argued that while the two approaches may appear to be distinct, we should instead view intuitive and analytic reasoning as a continuum,

as in real-world practice professionals do not rely solely on one approach or the other.

Further approaches to decision-making have been examined within the wider social work literature. For example, van de Luitgaarden (2009) has explored the potential of naturalistic reasoning approaches, including Klein's (1998) model of 'recognition primed' decision-making, to help social workers apply past knowledge and experience to support future decisions. Building on this, in their empirical study Platt and Turney (2014) compared such naturalistic models of decision-making with technical rational models, and argued that the naturalistic model, which takes into account the role of intuitive reasoning, individual factors and structural factors, can offer a more reliable framework for understanding of social workers' actual processes of 'sense-making' when making decisions. Similarly, Hackett and Taylor (2014) compared experiential with analytical decision-making approaches and suggested that the more intuitive, experiential approach appeared to dominate in child protection practice. The driver of this body of research has been the desire to understand how social workers use different reasoning skills in order to mitigate the inherent problems associated with particular decision-making approaches. For example, it has been suggested that intuitive approaches can incorporate individual biases, and may involve the flawed use of heuristics when attempting to process information quickly (Kirkman & Melrose, 2014). However, analytic reasoning requires sufficient time to systematically explore possible consequences of different decision options, and such time is not always available to busy social workers in real-world practice. Moreover, analytic approaches assume that social workers can objectively assess information in order to arrive at a rational decision outcome; this fails to

acknowledge the often stressful and emotional context of children protection work, and how this can impact on decision-making processes (Munro, 2008).

In light of the above challenges, there has been a growing interest in more holistic models of decision-making, which attend to the contextual reality of social work practice. One approach is the ‘Decision-Making Ecology’ framework proposed by Baumann, Fluke, Dalglish, and Kern (2014), which, like naturalistic reasoning models, incorporates a range of inputs including case-specific *and* individual/decision-maker factors, as well as external and organisational factors, in the overall decision-making process. Connected to the Decision-Making Ecology framework is the ‘General Assessment and Decision-Making Model’, which describes the psychological processes social workers use to assess a given situation, then positions this assessment against their individual threshold for action, as shaped by their personal values and professional experience. According to Helm and Roesch-Marsh (2017), the advantage of such ecological models is that they take into consideration the multiple personal and contextual factors that can impact on practitioner judgements and decisions. van de Luitgaarden (2011) has similarly emphasised the interactional nature of child protection practice, and the critical role of networks in the decision-making process. Yet, while approaches such as Decision-Making Ecology, the General Assessment and Decision-Making Model and actor network theory have offered important theoretical contributions to our knowledge of social work decision-making, there can be practical challenges when applying such broad models in research and practice. As such, it is important to reflect on what empirical research can tell us about decision-making and how this complex process can be reliably examined through different research methods.

2.3.2 Review of the empirical literature

A large number of studies were identified during the literature search related to social work decision-making and its associated concept, professional judgement. From this literature, it was possible to group the studies according to three broad themes: studies focused on how individual/decision-maker factors affect decision-making; studies focused on how environmental and organisational factors affect decision-making; and studies focused on decision outcomes.

Individual/decision-maker factors

The studies analysed for this review related to individual/decision-maker factors tended to focus on either how different forms of cognitive reasoning influenced individuals' decision-making, or how different forms of knowledge shaped individuals' decisions.

For example, as mentioned above, Hackett and Taylor's (2014) study, based in England, compared experiential and analytical decision-making models using documentary analysis techniques. As part of the study, 98 child protection core assessments were analysed; a second element of the study comprised of interviews with each of the assessment authors, and so provided participants an opportunity to explain their assessment reasoning in more detail. An important finding of the study was that the participant social workers used both experiential and analytical reasoning approaches when completing their assessments, however, they tended to use analytical approaches as a secondary 'check' for decisions made intuitively. For instance, some participants described using research evidence to reaffirm decisions that had already been made, and Hackett and

Taylor noted that this was more likely to occur when there were ‘higher stakes’ and a greater chance of potential blame. This finding could suggest that more intuitive, experiential approaches, which can be subject to greater individual bias (Kirkman & Melrose, 2014) tend to dominate in child protection decision-making.

Earlier studies by Holland (1999) and Stokes and Schmidt (2012) similarly identified that social workers used a combination of objective (analytical) methods, such as scientific observation, and subjective (intuitive) methods, including reflective evaluation, when analysing case information. Importantly, while different terminology was used within these studies, the empirical evidence considered as part of this review corresponds with Munro’s (2008) assertion that social workers use *both* analytic and intuitive reasoning approaches in practice, and both approaches can make a positive contribution to the decision-making process in different ways.

A number of studies included in this review also explored the use of decision-reasoning aids, including structured decision-making tools and heuristics. For example, research by van Nijnatten, van den Ackerveken, and Ewals (2004) explored the use of systematic hypothesis testing (HT) in Dutch child protection investigations, a process which involves conducting an initial assessment, then developing and testing a hypothesis and research plan based on these observations; the logic being that judgements which are treated as hypotheses will be “tested in a more rigorous and systematic way” compared to more intuitive assumptions (Munro, 1999, p. 754). van Nijnatten and colleagues used content analysis to examine 513 child protection board reports and 174 care plans which had used the HT approach, and triangulated this data with surveys of service users and professionals, to assess their ‘satisfaction’ with the HT

approach. The authors concluded that the use of the HT had improved the quality and rigour of the investigations by producing more “descriptive, indicative and explanatory” assessments (van Nijnatten et al., 2004, p. 537). However, while evidence from this study appears to suggest that such systematic reasoning approaches may improve reasoning processes and the quality of decisions, it should be noted that service user feedback revealed no improvement in satisfaction with the HT approach.

In contrast to the above findings by van Nijnatten et al. (2004), other studies have identified problems with the use of such systematic, analytical decision-making tools in child protection, related both to the construction of the tools and how the tools have been used by social workers in practice. For example, Baumann, Law, Sheets, Reid, and Graham (2005) analysed the use of actuarial risk assessment systems in three mixed-method studies, based in the USA. The studies indicated that the actuarial models were, at the time of the study, inferior or at least equal to caseworker judgement in the respect of reliability of outcome, with barriers to ‘administrative feasibility’ the most likely cause for model failure. Such barriers included problems with the model design, impacting the ability of the models to accurately predict short and long-term risk factors. In practical terms, participants also reported that the models were too inefficient for the realities of child protection work, with “too much time pass[ing] from the time clients are interviewed until the actuarial data are recorded and received” (Baumann et al., 2005, p. 487). Similar findings regarding the viability of structured risk assessment systems were noted by Gillingham and Humphreys (2010). Their study, which explored the use of structured decision-making (SDM) tools in South Australia and Queensland, used ethnographic and interview

methods to analyse how social workers were adapting to the introduction of SDM tools within their agencies. The findings suggested that participants tended to have made their decision on how to proceed with cases prior to using the tools, and some perceived the tools as extra paperwork. Other participants raised concerns that the tools could lead to a “de-skilling” of staff, “breeding workers who are good at ticking boxes” at the expense of developing their expertise (Gillingham & Humphreys, 2010, p. 2609). It should be noted that this study was based on interviews with 46 practitioners in six agencies, and in view of the timing of the study - shortly after the introduction of the SDM tools - the results may have been impacted to some extent by resistance to change among staff within the organisations. Despite this however, the results, along with the findings of Baumann et al.’s (2005) and Hackett and Taylor’s (2014) research, are further evidence that in practice social workers use primarily intuitive approaches, along with analytical approaches, when forming judgements and practice decisions.

Regarding the use of intuitive reasoning aids, research by Shapira and Benbenishty (1993) explored how a range of information ‘cues’ affected social workers’ decisions when they were asked to respond to factorial vignette surveys, which were analysed using regression analysis. Shapira and Benbenishty noted that certain cues were judged by participants to signify greater risk and so predicted a decision to intervene more than others. For example, the most predictive cues for intervention included the mother's relationship with the child, the parents' cooperation during previous interventions and signs of abuse or neglect. These findings suggest that certain cues act as intuitive ‘short-cuts’ during the initial decision-making process, particularly when there is incomplete or uncertain information. A similar conclusion was noted in a study by Sheppard

and Ryan (2003), who examined how social workers used different ‘rules’ to inform their decision-making, including ‘substantive rules’, which helped the participants to make sense of case information. For example, when participants were asked to respond to a case involving a teenage child experiencing behavioural difficulties who was being cared for by his grandparents, participants used substantive reasoning based on generalised rules, such as “a wide age gap can cause difficulties in parent-child relationships” (Sheppard & Ryan, 2003, p. 163). The authors emphasised that the participants used these substantive rules to aid their analytical reasoning, and did not use the rules alone to decide how to proceed in each case. Nevertheless, the findings help to support arguments regarding the contribution of heuristics and ‘rules of thumb’ in guiding decisions in practice, provided such rules are understood and applied appropriately (Taylor, 2016).

Alongside the above research into cognitive reasoning approaches, several studies have explored the different forms of knowledge used by individual social workers when making decisions. For example, studies by Benbenishty, Segev, and Surkis (2002), Drury-Hudson (1999) and McLaughlin, Rothery, Babins-Wagner, and Schleifer (2010) found that knowledge gained from professional experience had a significant impact on how practitioners processed information when making decisions, in support of theoretical models of ‘recognition primed’ decision-making, as discussed by Klein (1998) and van de Luitgaarden (2009). These findings suggest that experienced social workers may be more able to tap into their ‘practice wisdom’ to intuitively form judgements, or alternatively, that their experience equips practitioners with greater analytical ability. The application of knowledge gained from practice experience could also help to explain the results

of research by Braye, Preston-Shoot, and Wigley (2013), who examined the extent to which English social workers used legal knowledge to inform their decisions. In their study, it was found that among a sample of children's social workers who participated in peer-led interviews, knowledge was gained primarily from "unnamed professional or theoretical knowledge", which included professional experience and awareness of social work values, alongside legal and procedural knowledge (Braye et al., 2013, pp. 80-81). The reference to values in this study is relevant as values were similarly found to be an important source of knowledge for decision-making in research by Rosen (1994) and Keddell (2011). For example, Rosen (1994, p. 568) observed that among a sample of 73 Israeli social workers, over half of the rationales used by workers to explain their decisions were professional "value-based assertions"; this was followed by references to theory, policy and service users' wishes. These findings therefore support claims by Baumann et al. (2014) and Platt and Turney (2014), regarding the influence of individual/decision-maker factors, including professional experience and values, on the overall decision-making process. Similarly, in Keddell's (2011) study, based on interviews with 19 New Zealand-based social workers who were asked to describe cases they were 'pleased with' and explain their reasoning, it was noted that participants avoided moralistic judgements and instead displayed explicit social work values, such as respect and being non-judgemental, when making case decisions. A potential limitation of this small-scale study, however, relates to the fact participants were recruited from the same agency. It is therefore possible that the participants had adopted this explicitly value-based approach in part due to their environmental context and the culture of their wider organisation.

Environmental and organisational factors

Understanding if and how environmental factors impact child protection decisions is of particular relevance to this thesis given its comparative focus, and is a topic that has been explored in a number of empirical studies from a range of perspectives. Here, ‘environmental factors’ is used to describe the various external structural influences on practitioners’ judgement and decision-making, including legal duties, national social policies and the wider social context. The influence of such macro-level environmental factors on practice has been a subject of increased research focus in recent years. For example, three comparative studies by Berrick et al. (2016a, 2016b; 2015), which formed part of a larger study funded by the Norwegian Research Council, examined the factors affecting child removal decision-making in different national systems. Berrick and colleagues’ studies were based on the analysis of written documents and a survey of over 700 child protection professionals across England, Finland, Norway and the USA (California), and identified that professionals in the four nations approached decision-making in different ways; for example, in terms of the sources of support participants’ sought when making decisions and the level of individual discretion they were afforded. As the participants were recruited from different agencies within each country, the between-country differences suggest that the ways in which the participants formulated their decisions must have been influenced in some way by their external environment and national context.

Research by Benbenishty et al. (2015) similarly identified differences in child protection decision-making approaches across four countries: Israel, the Netherlands, Northern Ireland and Spain, and again participants were recruited from a range of agencies within each country. In particular, the authors observed differences in how the participants’ responded to a hypothetical case vignette in

terms of their attitude towards child welfare, their assessments of risk and their recommended intervention. For example, 52 per cent of the Spanish social workers recommended removal, more than double the proportion in Israel (25 per cent) (Benbenishty et al., 2015, p. 72). The authors acknowledged that individual practitioner values, measured using the Judgments and Decision Processes in Context (JDPIC) model, were likely to have impacted the results to some extent. However it can be practically difficult to separate an individual's personal values from their societal context, and this research helps to demonstrate the possible interaction between macro-structural forces and individual belief systems, and the influence of this interaction on decision-making. Earlier studies by Benbenishty, Osmo, and Gold (2003) and Brunnberg and Pećnik (2007) have similarly found that the national context can affect social workers' judgements with regard to child protection decisions.

In addition to the national context, the empirical literature reviewed for this chapter suggests that organisational factors can also have a considerable impact on decision-making processes and outcomes. For example, research by Jones (1996) examined different filter points in 701 child protection cases in one local authority in England. The filter points included the point of initial referral, the decision to hold a case conference, the decision at the case conference and the decision at the review conference. The study highlighted how cases were diverted away from the child protection system at each stage, so that a relatively small number of children initially referred to the local authority remained on the child protection register after the final filter point. Importantly, the results revealed that the construction of organisational processes, such as if and how regularly case conferences are held, can dictate when key decisions are made in respect of a

child and their family. Therefore, in this particular local authority, social workers' decision-making occurred in accordance with organisational processes and timescales, and not in accordance with the child or family's own needs and progress. Organisational factors were also discussed in research by Munro and Hubbard (2011), who examined how organisational systems impacted child protection processes using data from a number of practitioner and service user surveys. In particular, the authors noted that having sufficient "time and a forum for reflective practice and a culture that promotes it" (Munro & Hubbard, 2011, p. 734) was seen by the survey respondents as vital for effective decision-making. The themes of time and work cultures were similarly highlighted in the powerful ethnographic study by Broadhurst et al. (2010), which explored how practitioners in five English local authorities managed high caseloads and responded to organisational performance management pressures through often risky time-saving measures. The authors discussed how local factors, including referral rates and agency resources, affected organisational processes and in turn, social workers' practices. National assessment targets were also observed to be an important factor contributing to workload pressure and reduced time for reflection and analysis. This study again demonstrates the complex interaction between macro- and meso-structural factors, organisational factors and individual factors in shaping decision processes and outcomes.

Specific organisational processes shown to influence social work decision-making were explored in studies by Goldman and Foldy (2015) and Bradley and Höjer (2009). In Goldman and Foldy's (2015) study, the authors examined an approach to decision-making termed 'peer discussion' in two organisations in the USA: an employment service and a child welfare agency. In the child welfare

agency, transcripts of 47 peer-led meetings were analysed, supplemented by interview data. As part of peer discussion, multiple child welfare workers were consulted for advice and assistance on cases, and workers met as a team once or twice weekly to discuss their work. This formalised peer-led organisational structure provided a forum for workers to deliberate and reflect on case dilemmas, and this was observed to assist decision-making by providing additional opportunities and input for problem-solving. A similar finding regarding the benefits of group discussion for decision-making was discussed by Bradley and Höjer (2009), who compared approaches to social work supervision in England and Sweden. Separate studies were conducted based on interviews and focus groups with social workers and managers, who were asked about the content and format of supervision sessions in the respective nations. The English data revealed a predominance of one-to-one, manager-led supervision, while the Swedish data revealed a system of externally provided group supervision. The authors observed that the Swedish organisational approach appeared to promote more discussion and reflection, and afforded the social workers a greater degree of professional discretion over their decisions. These findings suggest that relatively small organisational changes, such as implementing additional systems of peer discussion or group supervision, may act as a supportive influence on individual workers' reasoning and decision-making.

Decision outcomes

A final group of identified studies focused specifically on the outcomes of child protection decision-making, including whether referrals should be investigated through formal child protection processes or not. It should be noted that these

studies were all conducted in the UK, specifically England and Northern Ireland, and so the results will have been influenced by this specific contextual setting.

Three interlinked studies were conducted by Spratt (2000) and Hayes and Spratt (2009, 2014) and provide a longitudinal analysis of how child welfare and child protection decision-making in Northern Ireland has developed over time, in the context of debates surrounding the ‘reorientation’ of UK social work practice towards greater family support (Department of Health, 1995). In the first study, based on an analysis of 200 case files and vignette-based interviews with eight senior social workers, Spratt (2000) identified that there was a high level of disagreement among the participant social workers regarding how to respond to the case vignettes. Despite this disagreement, however, the majority of respondents still categorised the cases as ‘child protection investigations’, rather than lower risk ‘child-care problems’. This, Spratt argued, revealed a preoccupation with risk management and highlighted the difficulty of strengthening family support measures within this practice environment. The follow-up studies by Hayes and Spratt (2009, 2014), which were similarly based on case file analysis and vignette-based interviews, identified a continued focus on risk management among the participant social workers, as well as a filtering of cases according to assessments of risk, rather than assessments based on children and families’ unmet needs.

Risk-orientated decision-making was also a central finding of research conducted by Wilkins (2015), which explored decision outcomes in three local authorities in London. In Wilkins’ study, participants were asked to respond to four vignettes of hypothetical child protection referrals by describing the main factors in the vignettes and how they would personally respond to the referrals in

practice. A key finding of the study was that there was greater discussion and agreement among participants regarding the risk factors within the vignettes, compared to protective or resilience factors. According to Wilkins, this suggested that the participants, and child protection social worker more generally, may need additional support and training to help them analyse and balance risk *and* protective factors when making everyday casework decisions.

Although the concept of risk was not my primary focus when locating literature for this review, authors such as Kemshall (2001) and Webb (2006) have highlighted that risk assessment increasingly features as an explicit stage of the decision-making process in child protection, mirroring a growing emphasis on risk in modern society more widely (Beck, 1992). According to some authors, this risk-emphasis has shifted the focus of social work intervention, leading to increased fear (Stanford, 2010), ethical stress (Fenton, 2014) and defensive decision-making (Stalker, 2003). For example, in Stanford's (2010) study based on the reflective accounts of 18 child protection social workers in Australia, it was argued that risk had become increasingly embodied through the construction of 'risk identities', with service users defined as 'high risk' being subject to more punitive discipline and control practices, while those defined as 'low risk' were frequently assessed as ineligible for services, despite evidence of need. Related to this, Stalker (2003) has argued that the analysis of risk has become a more 'forensic' activity, focusing on what went wrong and who was to blame, rather than an activity used for prediction and prevention. This, Stalker suggests, may help to explain the rise of defensive practice, whereby social workers are increasingly unprepared to take risks, even positive risks which may be of likely benefit to service users. The fact that research by Wilkins (2015) and others has

identified this apparent preoccupation with risk among English social workers specifically also supports existing analyses by authors including Parton (2011) and Munro (2011), who have discussed the influence of risk narratives on the wider national child protection system in England. Overall, these findings help to highlight where English child protection decision-making may differ from decision-making in Finland, given the evidence that the national contextual environment can shape social workers' decision reasoning processes and decision outcomes.

2.4 Social work ethics

In the previous section of this chapter I explored how social workers form judgements, make decisions and respond to complex problems, including ethical dilemmas, using strategies such as peer discussion and group decision-making (Bradley & Höjer, 2009; Goldman & Foldy, 2015). The following section of this chapter focuses on the related theme of social work ethics, and first considers some of the broad theoretical debates surrounding social work ethics and ethical conduct. Section 2.4.2 then reviews the empirical literature, focusing on three core areas of research: i) processes of forming ethical judgements in social work; ii) differences in social workers' ethical judgements; and iii) ethical dilemmas and ethical stress. A key finding of this part of the literature review is that social workers appear to use a range of ethical principles and approaches to guide their decisions, though individual social workers may conceptualise ethically difficult situations in different ways, and prioritise different principles. Despite this individual-level variation, however, research suggests that child protection social workers largely experience common ethical problems; for example, around

respecting service users' confidentiality and self-determination when managing limited resources. Importantly, as this research has originated from different national contexts, it suggests that social workers internationally can face similar ethical dilemmas. Though this literature is helpful for building a picture of how social workers' internationally experience ethical problems, at present there is currently limited evidence regarding if and how the national context impacts on ethical deliberation and engagement. Finally, the research explored as part of this review has revealed that social workers most commonly consult their colleagues and supervisors when faced with challenging ethical problems.

2.4.1 Overview

Ethical awareness is seen as central to the professional activity of social work (International Federation of Social Workers, 2018), despite the fact there exists a lack of consensus around what constitutes social work ethics, as well as how social work ethics differs from related concepts, such as social work values and principles. Clark (2000) has argued that the concepts should not be seen as interchangeable and appreciation must be given to the exact use of the terms in different fields of discourse. Additionally, as with any form of discourse, interpretations and constructions of social work ethics, values and principles must be seen as closely related to the historical and cultural contexts within which these concepts are shaped and applied (Hugman, 2012; Reamer, 1998).

In spite of the terminological ambiguity described above there has been a substantial increase in texts related to social work ethics since the 1990s, a trend which has been described by some as the “ethics boom” (Banks, 2008). This

literature, such as the writings of Sarah Banks and Frederic Reamer, has been largely been published in English, which is said to have produced a dominance of Western perspectives in this particular field of study (Hugman, 2008). In much of this literature, social work ethics is subdivided into the study of debates around moral philosophy and meta-ethics; normative ethics, which concerns the application of ethical theory to specific ethical dilemmas; and applied or professional ethics, which concerns the application of ethical norms to practice contexts, usually guided by structured ethical standards (Banks, 2012; Reamer, 2013). As a concept, social work ethics can therefore be seen to encompass the wide-ranging study of theoretical and philosophical debates, to the more focused study of contemporary codes of ethics in professional practice.

As regards the main philosophical debates relevant to social work ethics, Lonne, Harries, Featherstone, and Gray (2015) have suggested that the central focus concerns the question of whether human beings are moral by nature, or whether we become moral through the enforcement of external rules and duties. In thinking about ethics in this way, it is possible to separate the underlying ideas around social work ethics into principle-based and character or relationship-based approaches (Banks, 2012; Lonne et al., 2015). Principle-based approaches include the contrasting philosophies of deontology and consequentialism. Specifically, deontology focuses on the concepts of duty and moral rules and the belief that as rational actors, individuals can be guided in their behaviour through logical adherence to fixed moral principles; for example, the Kantian principle of ‘respect for persons’, which places paramount emphasis on respecting individuals’ rights to autonomy and self-determination. By contrast, consequentialism can be summarised through the basic premise that ‘the ends can justify the means’; that

is, the belief that an action can be judged as right or wrong based on the consequences of that action, irrespective of the nature of the action itself. Utilitarian arguments, based on the writings of Jeremy Bentham and John Stuart Mill, include the idea that happiness and utility should be maximised to benefit the greatest number, and are a further example of consequentialist thinking. Regarding the application of such principle-based approaches in social work, it has been suggested that neither approach is entirely suitable as deontology fails to provide a solution for balancing the competing rights of individuals, while consequentialism may not protect the rights of minority groups, and cannot assist when outcomes are uncertain; a situation which is common in social work practice (Lonne et al., 2015). Character and relationship-based approaches to ethics, including virtue ethics (McBeath & Webb, 2002) and the ethic of care approach (Gilligan, 1982; Tronto, 1993), differ from the above perspectives as they emphasise the moral character of the decision-maker or centrality of caring relationships in guiding moral action.

As regards how such philosophical ideas are used and applied in practice, Banks (2012) has argued that social workers do not tend to follow any one ethical approach but instead use a combination of frameworks, akin to Beauchamp and Childress' (2001) 'common morality' approach to bioethics. This combined approach can be seen in the International Federation of Social Workers' (2018) *Statement of Ethical Principles*, which includes elements of both principle and character-based approaches and has shaped national ethical codes around the world, including in England and Finland. Yet, while acceptance and adherence to national ethical codes is often a condition of registering as a professional social worker, the value of such codes is contested. For example, while some consider

that ethical codes can help to improve practice standards, others have argued that codes can be vague and unhelpful at best, and at worst can result in social workers practicing in an overly risk-averse manner (Banks, 2012; Witkin, 2000).

In response to the above debates, there has been a move within the literature towards developing practical tools to assist social workers in managing the everyday ethical complexities of their work. For example, Loewenberg, Dogloff, and Harrington (2000) built on deontological approaches to devise a fixed hierarchy of ethical principles, known as the ‘ethical assessment screen’, to support social work decision-making in a practical way. This approach places protection of life and the promotion of equality at the top of the hierarchy, while privacy and confidentiality, and truthfulness and full disclosure, are viewed as less fundamental to ethical practice. A contrasting approach is the ‘DECIDE’ framework proposed by Lonne et al. (2015), which does not prescribe any one fixed ethical approach or hierarchy of principles, but instead integrates ethical reflection into the wider decision-making process. This is done through a step-by-step model which involves *Defining* the problem; *engaging in Ethical review*; *Considering options*; *Investigating outcomes*; *Deciding on action*; and *Evaluating the results* (Lonne et al., 2015, p. 46). Such approaches, which explicitly integrate ethical reflection into practice, may be viewed as increasingly important in contexts such as England, where according to Featherstone et al. (2014) there has been a lack of open discussion around the ethics of child protection interventions and the broader value perspectives shaping current policy and practice.

The above overview highlights some of the different areas of focus within the theoretical social work ethics literature. In order to reflect on how social workers understand and use ethical concepts and ideas in everyday practice, the

following section of this chapter discusses key findings from selected empirical studies.

2.4.2 Review of the empirical literature

In contrast to the growing number of theoretical texts discussed above, there are relatively few empirical studies which have a primary focus on social work ethics. Of the studies analysed as part of this review, however, it has been possible to group the research according to three broad themes: studies focused on how social workers form ethical judgements; studies focused on the differences between social workers' ethical judgements; and studies focused on how social workers respond to ethical dilemmas and ethical stress in their work. It should be noted that a number of the studies discussed below originated from specific national contexts, in particular Israel and Canada, and were based on quantitative survey methods. As such, it is possible the contextual setting and similar methodology may have influenced the studies' results and discussion to some extent.

Forming ethical judgements

Research by Osmo and Landau (2006) has explored the apparent dissonance between philosophical debates surrounding social work ethics and the frameworks social workers actually use when forming judgements in practice. Specifically, their study surveyed the arguments and ethical theories cited by 62 Israeli social workers who were asked first about their favoured ethical principles, and second, how they would respond in practice to a series of case vignettes. The results revealed that the participants most frequently referred to deontological approaches

when asked about their preferred ethical principles, without reference to any practice situation. However, when presented with the case vignettes, the participants more frequently referred to teleological approaches, in particular ideas of consequentialism and utilitarianism. Osmo and Landau (2006, pp. 872-873) suggested that these results support the contention that “social workers are deontological in principle but adopt a utilitarian approach in practice”; a claim which also supports the assertion by Banks (2012), who argued that social workers use a combination of ethical perspectives when making decisions in practice. A further finding of Osmo and Landau’s study relates to the fact the participants more frequently referred to the principle-based approaches of deontology and consequentialism than character or relationship-based approaches, including care ethics or virtue ethics. Additionally, 30 per cent of the survey respondents did not justify their decisions using any explicit ethical theory when responding to the case vignettes. The authors concluded that based on these results, social workers may benefit from broader ethical training alongside training in critical thinking, to increase self-awareness and reflection and to avoid arbitrary, or even discriminatory practice decisions.

A more recent study by Gough and Spencer (2014) explored the broader basis of social workers’ judgements and decision-making in conflict situations. Based on a survey of over 300 Canadian social workers, the results indicated that respondents mainly used ‘non-formal’ approaches for overcoming conflict with service users, including obtaining advice and support from peers, rather than following any specific ethical theory, or referring to the Canadian Association of Social Workers’ code of ethics. When survey respondents were asked how important different resources were for their decision-making, the majority of

respondents referred to legal frameworks, followed by their personal ethics and values and agency policies and procedures. These results support the findings of research by Braye et al. (2013), discussed in section 2.3.2, which indicated that social workers use multiple sources of knowledge, including legal, procedural and values-based knowledge when forming practice judgements. The related finding by Gough and Spencer (2014), that the respondents rarely used their national code of ethics for overcoming conflict situations, has similarly been explored in research by Rossiter, Prilleltensky, and Walsh-Bowers (2000) and Keinemans and Kanne (2013). Based on in-depth interviews with Canadian hospital and children and family social workers, Rossiter et al. (2000) observed that instead of relying solely on their code of ethics when faced with difficult ethical choices, participants used dialogue with colleagues to interpret the code and to help them make complex practice decisions. Having a 'safe space' to engage in this dialogue and reflect upon ethical dilemmas was also seen as vital. In Keinemans and Kanne's (2013, p. 393) study, based on focus groups and interviews with frontline practitioners across eight agencies in the Netherlands, the participants reported that their national code of ethics played "no significant role" in helping them to overcome dilemmas, as the code failed to offer any concrete solutions to ethical problems. Moreover, the authors observed that participants did not appear to use any structured method for dealing with ethical dilemmas, and rarely labelled the dilemmas they encountered in explicitly moral or ethical terms. This finding suggests that the participants in the study found it difficult to connect ethical ideas and concepts to their practice (and so 'engage' with ethics, using the terminology of this study) when making practice decisions.

Differences in ethical judgement

Related to the above studies, a number of articles have compared individual social workers' understanding of and use of ethical ideas within their practice. For example, the question of how individual practitioners conceptualise 'ethically difficult situations' was explored in research by Banks and Williams (2005), based on the retrospective accounts of 32 UK social workers and youth workers. It was noted that the participants' use of 'ethics talk' varied; that is, while some used explicitly ethical language, others articulated ethically difficult situations without reference to specialist ethical terminology (Banks & Williams, 2005, p. 1010). The authors also categorised the participants' responses in terms of ethical 'issues', 'problems' or 'dilemmas', and observed that participants who described situations as dilemmas appeared to convey the greatest internal moral conflict when describing their practice. These findings suggest that responses to ethically difficult situations are highly individualised, highlighting the importance of individual/decision-maker factors and personal cognitive processes in decision-making when dealing with ethically complex matters.

Similar findings were noted by Freymond, Schmid, and DeGeer (2013), who explored the specific values child protection social workers used when forming judgements and making decisions in practice. Based on focus groups and interviews with 150 Canadian social workers, the authors identified the presence of both 'ultimate' and 'instrumental' values within the participants' responses. The paramount 'ultimate' value identified was the protection of child safety above all else; this view corresponds with the principles of consequentialist thinking, as child safety as an 'ends' was clearly prioritised by the participants in the study. The most common 'instrumental' values discussed included building supportive relationships with families and using interventions based on legal authority,

although variations were noted between the sites. As discussed by Freymond et al. (2013, p. 38), the fact that some participants held differing views on how child safety should be accomplished could be seen as evidence of ethical variation in practice, even if core values are shared.

Quantitative research by Landau (1999) and Landau and Osmo (2003) has similarly explored differences in professional ethical judgements through the concepts of ‘professional socialization’ and ethical hierarchies. For example, Landau (1999) compared the questionnaire responses of over 500 Israeli social work students and qualified social workers, and noted significant differences in the ethical judgements of individuals who self-reported as ‘religious’ or ‘very religious’, compared to those who described themselves as more secular. This finding suggests that individuals’ personal belief systems may have influenced their ethical judgements, despite the Israeli Association of Social Workers’ code of ethics stating that social workers should serve clients without ‘personal bias’ (International Federation of Social Workers, 2012). In Landau and Osmo’s (2003) later study, social workers were asked to rank order 12 ethical principles generally, and then in respect of two case vignettes. 45 per cent of the respondents’ ranked ‘protection of life’ as the most important principle, although there was no consensus on the remaining rankings. When presented with the case vignettes, respondents’ rankings changed depending on the scenario. The authors concluded that on the basis of these results, there seemed to be no empirical foundation for normative decision-making tools based on ethical hierarchies. Instead, the results indicated that the respondents had flexible personal hierarchies, in support of the concept of ‘ethical pluralism’; that is, the idea that ethical uncertainty can provide opportunities for reflection, “choice and

creativity”, as discussed by Hinman (2012, p. 333). The fact that the participants in Landau and Osmo’s (2003) study changed their ethical hierarchies when reconsidering the vignettes also highlights the importance of having time for reflection when making complex decisions, a point similarly discussed in Munro and Hubbard’s (2011) research.

The topic of personal ethical hierarchies has also been considered by Harrington and Dolgoff (2008), who explored how 114 social workers from the USA independently ranked Loewenberg et al.’s (2000) hierarchy of seven ethical principles in a series of workshops. As in Landau and Osmo’s (2003) study, the authors noted that there was no unanimous agreement on the rank ordering of the ethical principles among the participants. However, Harrington and Dolgoff (2008) defended the principle of the tool and argued that the ethical hierarchy concept proposed by Loewenberg et al. (2000) may still serve as a useful training resource, as it may help individual practitioners to critically reflect on their values and beliefs and develop their own personal ethical hierarchies.

The research by Banks and Williams (2005), Landau (1999) and Landau and Osmo (2003), discussed above, explored differences in social workers’ personal ethical judgements within single-country studies. However, when conducting this literature review I was particularly interested in locating studies which compared social workers’ ethical judgements *across* nations, due to my aim of comparing ethical engagement in England and Finland. When searching for literature, a two-nation study which examined the practice of ‘ethics work’ in multi-disciplinary settings in England and Finland was identified (Saario et al., 2018). However this study did not explicitly *compare* practice across the nations,

nor did it focus on social work ethics specifically; indeed, participants included a psychiatric nurse, an occupational therapist and housing support workers.

Overall, only one comparative study relating to social work ethics and ethical dilemmas was identified, which highlights the relative absence of empirical research in this area. This study, by Meysen and Kelly (2018), compared the legal-institutional frameworks for child welfare interventions in four regions - England/Wales, Germany, Portugal and Slovenia - and analysed focus group data involving 75 professionals, 14 of whom were qualified social workers. The aim of the study was to explore the 'cultural premises' that shape child protection intervention decisions, including what professionals from the different nations considered to be ethical dilemmas. The authors found that, similar to the differences identified at a policy and system level, contrasting ethical perspectives and dilemmas were discussed in the professionals' narratives across the four contexts. For example, in England and Wales professionals tended to prioritise formal guidelines and interprofessional cooperation (for example, sharing information about children and families across agencies); however, in Germany, cooperation with family members and building trusting relationships with service users was considered to be more important. Based on this finding, it is possible to identify different attitudes towards the ethical principle of respecting service user confidentiality within the two nations. This highlights the potential for different ethical approaches to social work decision-making cross-nationally.

Dilemmas and ethical stress

A number of the empirical studies discussed above indirectly explored how social workers experience ethical dilemmas and conflicts; for example, the studies by

Banks and Williams (2005), Gough and Spencer (2014) and Meysen and Kelly (2018). However, research by Linzer, Conboy, and Ain (2003) focused explicitly on the types of ethical dilemmas encountered by social workers, including how social workers handle and respond to these dilemmas. Based on a survey of 127 Israeli social workers, the results of Linzer et al.'s (2003) study revealed that the respondents experienced a range of ethical dilemmas, including issues related to respecting service user confidentiality, the number of service users per social worker (linked to resource scarcity), gaining informed consent from service users and respecting service users' right to self-determination. In terms of how the social workers managed these conflicts, respondents most frequently reported that they consulted a colleague, consulted a supervisor or simply resolved the issue on their own. These options were each selected before consulting the Israeli Association of Social Workers' code of ethics, a finding which again supports the observations of Gough and Spencer (2014), Keinemans and Kanne (2013) and Rossiter et al. (2000), regarding the apparently limited role of professional ethical codes in supporting everyday social work decision-making in practice.

McAuliffe and Sudbery (2005) and Papadaki and Papadaki (2008) similarly explored social workers experiences of managing ethical dilemmas in Australia and Greece respectively. Based on similar methodologies, in which participant social workers were asked to discuss an ethical dilemma they had experienced in their practice, participants in the studies referred to dilemmas including their obligation to respect the human rights of service users while adhering to agency protocols, as well as dilemmas arising from limited agency resources. Participants also discussed the importance of accessing support from supervisors and colleagues; however, it was observed that there could sometimes

be practical difficulties in accessing this support. This specific finding, regarding the importance of support networks for managing ethical dilemmas, also corresponds with the findings of Goldman and Foldy's (2015) study from the USA, which highlighted the potential of peer-support networks in helping social workers to resolve everyday ethical dilemmas.

Similar findings to the above have been noted in the Finnish context in studies by Mänttari-van der Kuip (2014; 2016). Based on surveys of Finnish social workers from different agencies, including child welfare services, Mänttari-van der Kuip asked respondents to indicate on a Likert scale whether working conditions in a range of areas had improved or deteriorated. Specifically, Mänttari-van der Kuip (2014, p. 683) observed that respondents reported deteriorating work well-being due to "budget constraints", "changes in opportunities to practice according to one's professional values" and "not being able to do the job as well as one would like to". In her later study, Mänttari-van der Kuip (2016) explored the connection between budget constraints and 'moral distress', a concept first developed by Andrew Jameton in the context of nursing, which describes the emotional response "when one knows the right thing to do, but institutional constraints make it nearly impossible to pursue the right course of action" (Jameton, 1984, p. 6). Mänttari-van der Kuip (2016) identified a clear association between the social workers who reported higher levels of moral distress and those who reported greater experiences of budget constraints, insufficient resources and work overload. These findings suggest that organisational factors, such as resource scarcity, can act as a key contributor to ethical stress within the workplace. Mänttari-van der Kuip's findings are particularly relevant for my own research as they highlight how the working

conditions of Finnish social workers have been affected in recent years by reductions in public expenditure in social and child welfare services (see also Satka et al., 2007).

2.5 Comparative child welfare and child protection

Sections 2.3 and 2.4 of this chapter have explored the theoretical debates and empirical literature relating to social work judgement and decision-making, and social work ethics respectively. The penultimate section of this chapter considers research and scholarship relating to comparative child welfare and child protection social work, with specific reference to social work practice in England and Finland. Section 2.5.1 begins with an overview of the key developments in comparative child welfare literature, focusing on the leading child welfare system ‘orientations’ typology proposed by Neil Gilbert and colleagues (Gilbert, 1997; Gilbert et al., 2011b). Following this I go on to review the cross-national empirical literature, focusing on three ‘scales’ of practice: i) the macro-policy context, and how it can influence child welfare practice in different jurisdictions; ii) the organisation of child welfare and child protection social work at the professional level, and iii) the organisation of child welfare and child protection at the practice level.

The different scales of focus within the empirical literature highlight the difficulty of capturing all aspects of a national child protection system within any one empirical study. While theoretical texts necessarily simplify national systems into broad categorisations (Gilbert, 1997), the empirical studies analysed as part of this review suggest that the reality of child protection practice is more complex.

For example, research evidence indicates that while differences exist regarding the level of regulation and practitioner discretion in the English and Finnish contexts, in everyday practice, similarities exist in social workers' attitudes towards partnership and parental involvement in child protection decisions within the two nations. Arguably, the presence of such differences and similarities in the two systems makes it difficult to ascribe any fixed classification to either nation and raises questions for this study, in terms of how these differences and similarities influence the way social workers make decisions in practice and engage with ethics.

2.5.1 Overview

There has been a steady growth in cross-national comparisons of social work since the 1990s, which have included comparisons based on models of welfare and social policy, as well as profession-orientated and practice-orientated comparisons (Meeuwisse & Swärd, 2007). Within the field of child welfare and child protection specifically, a heightened interest in alternative policy approaches emerged in the 1970s and 1980s connected to a discourse of 'crisis', particularly in the North American and UK contexts (Gilbert, 1997; Stafford et al., 2012). This narrative of crisis emerged partly in reaction to the influential paper, *The Battered Child Syndrome*, by Kempe, Silverman, Steele, Droegemueller, and Silver (1962), which drew increased public attention to the problem of child abuse, while in the UK a series of high profile child deaths further increased public and political debate on child protection issues. From a UK/English perspective, several prominent comparative studies into child protection were undertaken in the 1990s by Rachael Hetherington and colleagues at the Centre for Comparative Social

Work Studies at Brunel University, including the eight-country comparison of child protection systems in Europe, titled *Protecting children: Messages from Europe* (Hetherington, Cooper, Smith, & Wilford, 1997). This study adopted an explicit ‘learning from others’ approach (Baistow, 2000), and focused on how the English child protection system could be improved, informed by learning from its European neighbours. More descriptive, reflective comparisons of European child protection systems, and of social work more broadly, were also published around this time; for example by Harder and Pringle (1997); Shardlow and Payne (1998) and Adams, Erath, and Shardlow (2000a, 2000b). Additionally, several regional comparative studies have provided detailed accounts of differences within national groupings; for example, the comparison of UK child protection systems by Stafford et al. (2012), and the collection of Nordic child welfare studies edited by Forsberg and Kröger (2010).

This varied comparative literature published since the 1990s has offered important insights into the way the national environmental context appears to influence social workers’ approaches to decision-making when supporting families. Alongside this body of research, a number of theoretical comparative texts have also been published, which have applied social policy and welfare typologies to the activities of social work and child protection specifically. For example, Walter Lorenz (1994) built on Esping-Andersen’s (1990) concept of welfare regime-types to attempt to explain European variations in social work practice. In his analysis, Lorenz identified four models of social work in Europe, including the ‘residual’ model, which emphasised individualised casework approaches and was most apparent in the UK; the ‘Scandinavian’ model, which favoured universalist approaches to welfare, characteristic of the Nordic nations;

the ‘corporative’ model, based around the principles of subsidiarity, most present in Continental Europe; and the ‘rudimentary’ model, found in nations with developing welfare states such as in Southern Europe. However, arguably the most influential comparative analysis of child protection social work from this period was the text *Combating Child Abuse: International Perspectives and Trends*, edited by Neil Gilbert (1997). This study used expert knowledge and secondary analysis to present accounts of nine international child protection systems and went on to describe the extent to which each national system corresponded with either the ‘child protection’ or ‘family service’ orientation. These binary orientations were constructed on the basis of four criteria: the problem frame of child protection; the preliminary intervention; the state/parent relationship; and the nature of out-of-home placements (see Table 1).

Table 1: Characteristics of child protection system orientations

	Child protection orientation	Family service orientation
Problem frame	Individualist/moralistic	Social/psychological
Preliminary intervention	Legalistic/investigatory	Therapeutic/needs assessment
State-parent relationship	Adversarial	Partnership
Out-of-home placement	Involuntary	Voluntary

Adapted from Gilbert (1997, p. 233)

While the contributing authors to Gilbert’s (1997) edited work acknowledged that some of the nations included in the analysis, such as England, did not fit neatly into either of the two groupings, the typology nonetheless helped to shape the

commentary of later comparative studies; for example, by Hearn et al. (2004). In the 2011 follow-up to Gilbert's original analysis, however, it was suggested that several of the national systems previously labelled as child protection or family service-orientated were now converging towards a common 'child-focused' orientation, which emphasised children's rights and the need for national social investment in children and young people (Gilbert et al., 2011b). This shift highlights one of the central problems concerning the construction of social policy and welfare typologies; that is, the fact that political, economic and social systems are complex and dynamic, meaning that any analysis can only provide a 'snapshot' of policy at a particular point in time, which may become outdated and inaccurate. More recently, Parton (2017) has discussed how the identified orientations of Gilbert's (1997) original research may be unsuitable for comparing child protection systems globally, particularly in developing nations. Similarly, Connolly, Katz, Shlonsky, and Bromfield (2014) have attempted to broaden the theoretical development of child protection system typologies by proposing four new system 'ideal-types': authoritarian individualism, permissive individualism, authoritarian collectivism and permissive collectivism.

The above developments in comparative child welfare and child protection research are relevant as they demonstrate the challenge and complexity of conducting cross-national research in this area. Child protection practice is shaped at the macro-structural level by a wide range of factors, including legislation and policy, which are themselves shaped by the values and belief systems held in a given society at a particular time. At the same time, child protection practice is shaped by numerous meso- and micro-level factors, including organisational contexts and the beliefs, knowledge and expertise of the individual social workers

tasked with responding to child welfare concerns. In order to unravel this and to understand the specific features of child welfare and child protection social work in England and Finland at the practice level, in the following section I consider key empirical comparative studies relating to the two national contexts.

2.5.2 Review of the empirical literature

My review of the empirical literature relating to comparative social work research broadly supports the analysis of Meeuwisse and Swärd (2007), who suggested that existing comparative studies have focused mainly on macro-policy matters; professional social work and its organisation in different contexts; or on social work practice and work with service users. The empirical studies included in this review are therefore discussed below in accordance with these three broad thematic areas.

The macro-policy context

Amid the discourse of crisis surrounding child protection in the UK in the 1980s and early 1990s, several empirical studies were conducted at Brunel's Centre for Comparative Social Work Studies, including an Anglo/French comparison of the social work role in child protection (Cooper et al., 1992); a critique of the English and Welsh child protection systems through comparison with the French system (Cooper, Hetherington, Baistow, Pitts, & Spriggs, 1995); and a cross-national comparison of eight child protection systems across Europe (Hetherington et al., 1997). This latter study was the most influential and highlighted important differences between the English system and other European approaches to child welfare. Based on data from seminars with social workers across eight countries,

the research identified a number of ‘messages’ for English practitioners, including the messages that social workers should not rely on strict procedures to work effectively, and that children should be afforded a greater say in decisions made about them. This research fed into a wider debate around the need for a ‘reorientation’ of English child protection social work, towards a greater prioritisation of family support (Department of Health, 1995). These debates influenced child welfare policy in England throughout the late 1990s and 2000s (Parton, 2014a), and so it could be expected that aspects of the English child protection system may have changed since Hetherington et al.’s (1997) analysis. Despite this however, more recent empirical analyses have continued to identify key differences between the English and other European child protection systems, including observable differences between English and Finnish approaches to child welfare at the macro-level.

An illustrative example is the comparative study of child welfare removals by Berrick et al. (2016b), also discussed in section 2.3.2 of this chapter. This study surveyed 772 child welfare professionals in four nations - England, Finland, Norway and the USA (California) - in respect of the time afforded for child protection decision-making, decision-making accountability and the quality of the decisions made. The study highlighted differences between systems of institutional support for practitioners with a clear distinction between England’s system of ‘vertical institutional’ support, compared to Finland’s more horizontal support system (Berrick et al., 2016b, pp. 460-461). Specifically, the results revealed that the English practitioners were more likely to seek support for decisions from managers and agency lawyers, in contrast to the Finnish practitioners, who were more likely to seek support from co-workers, supervisors

or the parents of the child/children concerned. A further finding was that the English practitioners had the least confidence in their decisions compared to professionals from the other nations, something the authors attributed to England's "tightly regulated and highly proceduralized child protection system" (Berrick et al., 2016b, p. 11). This conclusion supports the earlier finding by Hetherington et al. (1997), regarding the more proceduralised nature of England's child protection system compared to other European nations.

The findings noted by Berrick et al. (2016b) regarding Finland's more horizontal system of support, relative to the systems of England, the USA *and* Norway, also provides evidence of policy and practice differences within the Nordic region. This theme of intra-regional difference was the subject of a separate study by Blomberg et al. (2010), which compared processes of managing child welfare referrals in Finland, Norway, Sweden and Denmark. In the study, the authors noted broadly similar patterns regarding the number and nature of child welfare referrals within the nations; however key structural differences were noted, for example, in relation to levels of work specialisation and caseloads. In particular the authors noted that child welfare social workers in Finland received more than double the number of referrals per worker than in Norway (Blomberg et al., 2010, p. 39), which suggests that Finnish social workers may experience a higher level of work pressure than practitioners within the other Nordic nations. This finding may be supported by the research concerning ethical stress among Finnish social workers by Mänttari-van der Kuip (2014; 2016), discussed earlier in section 2.4.2. Similarly, in a survey conducted by Juhasz and Skivenes (2018), 84 per cent of Finnish child welfare social workers reported 'time/caseload factors' as barriers to care order preparation. As regards the relevance of these

findings to my own research, the findings could suggest that the decision-making challenges and ethical stresses connected to time pressure, also present in England (Broadhurst et al., 2010), may be similar in both the English and Finnish contexts.

Professional social work

As regards the day-to-day activities of social workers in England and Finland, the comparative review by Hearn et al. (2004, p. 38) identified that child welfare and child protection practices in England were mainly ‘law-led’, while in Finland approaches were largely ‘discretion-based’, due in part to the nature of the country’s less prescriptive child protection legislation. As will be discussed in the following chapter, the legislative basis for intervention in Finland has been updated since Hearn et al.’s (2004) study, although recent empirical studies continue to support the suggestion that Finnish social workers experience a greater level of autonomy over their work compared to social workers in other nations. For example, the analysis by Berrick et al. (2015), which was connected to the 2016 study discussed above, explored the discretionary space afforded to individual child protection workers in England, Finland, Norway and the USA (California). By conducting document analysis of legislative, policy and practice guidance, the authors explored four separate dimensions of discretion: the knowledge and information used in child removal decision-making; the time permitted to process information; the involvement of children and families in the process; and the accountability mechanisms in place to monitor and improve decisions. The findings of the 2015 study indicated that the English child protection system was the most highly regulated and allowed for minimal discretion, whereas Finland’s system was the least regulated and provided social

workers the most discretionary space of the four nations. This finding regarding the comparatively limited discretion afforded to English social workers has also been noted in separate comparative analyses by Glad (2006), Littlechild (2005) and Bradley and Höjer (2009). In Glad's (2006) analysis, which explored professional co-operation in child welfare in Denmark, Germany, Sweden, the USA (Texas) and the UK (England and Wales), social workers were asked to consider a hypothetical case and report on who they would discuss the case with at different stages of the scenario. In England and Wales, a higher percentage of respondents reported that they would discuss the case with a team leader at an early stage, when compared to other respondents from Europe. Similarly, in Littlechild's (2005) study based on questionnaire and interview data, which explored how English and Finnish child protection social workers experienced violence and aggression from service users, it was noted that the Finnish participants reported greater confidence and wider scope for decision-making in their practice. In the Finnish context there also appeared to be more effective organisational systems for responding to conflict and less fear of criticism, when compared to the experiences of the English participants (Littlechild, 2005, p. 76).

The subject of discretion and managerial involvement in decisions was similarly examined through the focus of supervision arrangements in the cross-national analysis by Bradley and Höjer (2009). As discussed previously in section 2.3.2, this study reported that the English social workers were mainly supervised 'in-house' by their line managers, while the Swedish social workers were offered group supervision, facilitated by an independent, external supervisor. Bradley and Höjer (2009, p. 81) observed that while the English model provided a supportive learning environment for newly qualified social workers, the Swedish model

provided “an established way to enable experienced workers to reflect on how they may choose to exercise discretion and other creative practices”, while promoting an “independence of thought and vision”. This would suggest that English approaches to supervision are more directive and hierarchical, and potentially less conducive to the exercise of professional discretion than the Swedish model of external group supervision. Importantly, the same model of external supervision discussed in Bradley and Höjer’s research is also common in Finland, and has been referred to as a significant source of support for decision-making in comparative research by Skivenes and Tonheim (2016).

The above findings by Berrick et al. (2015), Bradley and Höjer (2009), Glad (2006) and Littlechild (2005) separately indicate that English social workers appear to be relatively more reliant on input from their managers and supervisors, and experience lower levels of individual discretion over their day-to-day decisions. This apparent feature of child protection social work in England is relevant to this study as it could have implications for the extent to which English social workers, compared to their Finnish counterparts, independently reflect upon the ethical complexities of cases before seeking advice from senior colleagues.

Social work practice

When locating studies for this review, relatively little comparative research was identified focused explicitly on practice and direct work with children and families in England and/or Finland. However, within the research that was located, several comparative studies examined attitudes towards client ethnicity in child welfare social work. For example, Soydan (1995) used the vignette methodology to explore how 91 social workers from England and Sweden

assessed a hypothetical migrant family. The results indicated that the English participants were more distrustful of the referral information as compared to the Swedish participants, which the author attributed to differences in cultural relativity within the two nations. Similar research has since been conducted by Williams and Soydan (2005) and Kriz and Skivenes (2010), and significantly, the results of these studies indicate that national differences in practice around client ethnicity appear to have become less apparent since Soydan's original analysis. This finding could support the suggestion that there has been a convergence in child welfare practice and standards in many European nations in recent years (Gilbert, 2012; Gilbert et al., 2011b).

Similar changes in practice over time are noted in cross-national studies focused on child visibility and service user involvement in case decisions. Such subjects were discussed in the influential comparative analysis by Hetherington et al. (1997), who suggested that English social workers needed to involve children in decision-making to a greater extent. In a later comparative study by Nybom (2005), based on a survey conducted between 1998 and 2000, it was noted that the British social workers appeared to place less emphasis on including the views of children in their assessments when compared to social workers in Denmark and Sweden. It is relevant, however, that following the period of data collection for Nybom's study, UK legislation was amended to require that social workers ascertain and give due consideration to children's wishes and feelings when providing services (Section 53, Children Act 2004). Therefore, it is conceivable that the results of Nybom's study may be different if replicated today. As regards parents' involvement in decisions, a more recent comparative study by Berrick et al. (2016a) compared social workers' survey responses in Finland, Norway,

England and the USA (California). The findings of this study indicated that, despite the contrasting child protection systems, practitioners in the four nations held broadly similar views towards parental involvement, and considered that involving parents in decisions on removal was a vitally important aim for all child protection workers. Again, this finding arguably supports the claim by Gilbert et al. (2011b), regarding the apparent convergence of child welfare practice approaches across national child protection systems in recent years.

Taken together, the comparative studies relating to child welfare and child protection in England and Finland, discussed in this section, highlight clear differences *and* similarities across the macro-policy, professional and practice-levels within the two countries. This evidence therefore challenges the accuracy of binary categorisations of two national systems as presented in past research (Gilbert, 1997).

2.6 Literature review summary

In this chapter I have examined theoretical texts and empirical studies relating to three broad subject areas: social work judgement and decision-making; social work ethics; and comparative child welfare and child protection research. In so doing I have highlighted some leading debates and have connected key findings back to the central research problem of this thesis: how do child protection social workers in England and Finland make decisions and engage with ethics during this process?

In particular, this literature review has revealed a number of key areas deserving of further investigation, summarised below.

First, the literature has indicated that social workers use both analytical and intuitive reasoning approaches when making decisions (Hackett & Taylor, 2014; Holland, 1999; Munro, 2008; Stokes & Schmidt, 2012). This suggests that alongside case-specific factors and national and organisational policies, social workers' decision-making is guided by individual cognitive processes, as shaped by cues and heuristics, professional experience and personal values. Importantly, social workers' personal values and assessment decisions appear to be influenced by their national cultural environment, as demonstrated through comparative research by Benbenishty et al. (2015) and Brunnberg and Pećnik (2007). In the UK context specifically, a policy focus on risk over needs assessment appears to have influenced how social workers interpret referrals and make decisions on appropriate forms of intervention (Hayes & Spratt, 2009; Spratt, 2000; Wilkins, 2015). These findings highlight the complex interaction between the macro-contextual environment and individuals' decision-reasoning, an interaction that is further complicated by the impact of organisational factors, which are themselves shaped by the national and local environment. Therefore, in order to explore how social workers in England and Finland make decisions when collecting empirical data for this thesis, during the process of conducting this literature review it became clear that information about national, organisational *and* individual/decision-maker factors must be captured as part of the data collection process.

Second, despite the existence of international and national codes of ethics for social workers, research indicates that social workers conceptualise ethical problems in different ways, and have contrasting and flexible personal ethical hierarchies (Banks & Williams, 2005; Harrington & Dolgoff, 2008; Landau &

Osmo, 2003). In practice, this means that individual social workers appear to prioritise different ethical principles, and personal rankings of these principles may also change depending on the practice situation. This seems to occur in spite of the fact that social workers working in child protection appear to experience broadly similar ethical dilemmas in their work (McAuliffe & Sudbery, 2005; Papadaki & Papadaki, 2008). Although these findings are of relevance to this thesis, there was a notable gap in the literature identified as only one of the reviewed studies concerning social work ethics adopted a comparative research design. As such, there seems to be relatively little evidence regarding the impact of the national contextual environment on how social workers conceptualise and engage with ethics in everyday practice. While numerous comparative studies have explored social work decision-making in different national contexts, this review has demonstrated the potential contribution of this thesis, given the relative absence of comparative literature relating to social work ethics specifically. This is despite assertions within theoretical literature that individual and professional ethical perspectives are shaped by local environmental factors (Healy, 2008).

Third, empirical studies have highlighted indications of both difference and similarity in English and Finnish child welfare and child protection policy and practice (Berrick et al., 2016a, 2016b; Berrick et al., 2015). This finding reinforces the need to explore local practice realities, rather than relying on macro-scale system generalisations, when addressing the research aims of the thesis. In addition, the suggestion that the English and Finnish child welfare contexts appear to be changing, and possibly converging (Gilbert, 2012) deserves further consideration since any state of flux or instability is likely to impact on

organisational systems, as well as on individual social workers' attitudes and practices.

Before discussing how these various findings have contributed to the research design of this study, the next chapter explores in more detail the legislative and policy context underpinning child welfare and child protection practice in England and Finland; information that is relevant given the demonstrable impact of these contextual factors on practitioner decision-making.

Chapter Three

Legislative, Policy and Practice Contexts

3.1 Introduction

In chapter two I presented the results of the literature review, which were focused around three broad subject areas: social work judgement and decision-making; social work ethics; and comparative research on child welfare and child protection with specific reference to England and Finland. A central finding of this review was the apparent impact of social workers' contextual environments on how they assess child protection referrals and make decisions on whether and how to intervene. In particular, studies by Berrick et al. (2016b) and Meysen and Kelly (2018) highlighted how national legal and institutional structures shaped social work practice in contrasting ways in different jurisdictions. To explore this issue further in the context of the research aims set out in chapter one, this chapter examines the specific legal, policy and practice frameworks surrounding child welfare and child protection in England and Finland respectively, focusing on recent developments in child welfare and child protection practice; current legislation and policy; and the relationship between children, families and social workers in the two nations. The aim of exploring the above is to improve understanding of the mechanisms underpinning the English and Finnish systems, by describing and analysing "individual country-specific traditions and their development" (Hämäläinen, 2014, p. 197), to assist the process of comparative analysis discussed later in the thesis.

3.2 Child welfare and child protection in England

This following section of this chapter explores the literature surrounding child welfare and child protection practice in England, as well as past claims that England's system for child welfare may be representative of a 'child protection-orientated' system (Gilbert, 1997), characterised by legalistic and adversarial interventions, and by remedial, rather than preventative child welfare support.

3.2.1 Developments in child protection in England

The origins of child welfare in England are closely related to the development of welfare provision in the country more broadly; a useful overview of these developments can be found in Harris (2008), which in particular explores the influence of neoliberal thinking and the Thatcher government's policies on social service provision and England's wider welfare system. Most modern accounts of child protection in England however begin with a discussion of the emergent narrative of 'crisis', discussed previously in this thesis, which began to emerge following the murder of seven-year-old Maria Colwell by her step-father in 1973. Throughout the 1980s there were further public inquiries into child deaths linked to abuse or neglect, which each criticised welfare professionals for failing to protect children, while events such as the Cleveland affair underlined systematic problems in how child abuse investigations were undertaken. In his authoritative assessment of the climate at the time, Parton (1991) described how it was within this narrative of crisis that England's current child protection legislation was constructed. The Children Act 1989, he argued, was an explicit attempt to respond to public concerns surrounding the practices of welfare professionals, and to

redefine the relationship between the state and families in relation to children's upbringing.

Further policy debate took place in the 1990s prompted by an influential Audit Commission (1994) report and research commissioned by the Department of Health (1995). The latter report summarised the findings of 20 research studies and recommended a 'refocusing' of child protection work towards a prioritisation of family support, and a move away from more coercive forms of intervention. The New Labour government, elected in 1997, accepted many of the recommendations of the refocusing debate. The principles of integrated, holistic support correlated with the government's 'third way' strategy of social investment (Giddens, 1998), and led to policy initiatives including *Sure Start*, aimed at promoting positive development for all children at the earliest stage, to offset the likelihood of problems developing later in life (Glass, 1999).

During the New Labour government, additional reforms were implemented following the Laming Inquiry into the murder of eight-year-old Victoria Climbié (Laming, 2003). In response to the Inquiry, the government published the Green Paper *Every Child Matters* (HM Treasury, 2003), which reaffirmed a commitment to early intervention and an increased focus on children's rights. According to Gilbert, Parton, and Skivenes (2011a), the reforms of this period may be seen as a clear attempt to move practice in England away from a child protection-orientated system, towards more family service and child-focused approaches. However, one consequence of the New Labour reforms was an increase in the volume and prescription of statutory guidance and regulation for social workers, as well as an increased focus on the identification of risk (Parton, 2011). For instance, the core guidance document relating child protection in

England, *Working Together to Safeguard Children*, increased from 120 pages in 1999 (Department of Health, Home Office, & Employment, 1999) to 390 pages by 2010 (HM Government, 2010). Additionally, despite attempts to reduce child welfare referrals, caseloads and work pressures for social workers remained high (Broadhurst et al., 2010). It was within this context that the death of Peter Connelly in 2007 again sparked public concern that social workers were failing to protect children, and according to Parton (2011), this incident led to a re-evaluation of Labour's approach and to a 'rediscovery' of child protection in policy narratives.

In 2010, the newly elected Conservative-led government commissioned a comprehensive review of child protection in England (Munro, 2011). Munro's review offered a number of recommendations, including the removal of unnecessary prescription and a strengthening of early help for families. While the government accepted some of the review's recommendations, in particular, regarding the removal of bureaucratic "red tape" (Education Committee, 2012), Munro's call for an emphasis on early help was rejected as the government's dominant austerity agenda saw a reduction in spending across public services, particularly spending on local government (Hastings, Bailey, Bramley, Gannon, & Watkins, 2015). A report commissioned by the Children's Commissioner for England, produced by the Institute for Fiscal Studies, noted that spending on "early and preventative interventions" in English children's services reduced by approximately 60 per cent in real terms between 2009-10 and 2016-17 (Kelly, Lee, Sibiet, & Waters, 2018, p. 5). Alongside this shift away from preventative services, child protection-orientated initiatives such as the *Troubled Families* programme, targeted at "risky" families, received increased political support

(Jupp, 2017, p. 266). According to Parton, this normative shift represented a decisive move away from Gilbert's (1997) family service orientation, back towards the child protection orientation and an increasingly "authoritarian neoliberal state" in the operation of services for children and their families (Parton, 2014b, p. 2052). In many ways, these debates echo the theoretical writings of Lorraine Fox Harding, who has explored contrasting value perspectives as applied to child welfare and child protection policy. Applying Fox Harding's analysis to recent policy shifts in England, it could be argued that approaches have moved away from the 'modern defence of the birth family and parents' rights' perspective, more towards the perspectives of 'laissez-faire and patriarchy', and 'state paternalism and child protection', characterised by, on the one hand, minimal state intervention or support for low-level needs, combined with more coercive, non-consensual interventions when more significant needs or 'risks' are identified (Fox Harding, 1997).

3.2.2 Legislation and policy in England

Child protection social work in England is presently guided by the Children Act 1989. This legislation is underpinned by several principles including the welfare or 'paramountcy' principle, the principles of 'no order' and 'no delay', as well as commitments to parental responsibility and partnership (Holt, 2014). In practice, the principle that the child's welfare is paramount guides the actions of all child welfare professionals, however direct reference to 'the court' within current legislation arguably supports claims surrounding the overly legalistic focus of child protection in England, as discussed by Parton (1991) and Hearn et al. (2004). This focus on the role of the courts also stands in contrast to legislative

approaches in other regions of the UK, notably in Scotland (Stafford et al., 2012). As regards the thresholds for child protection intervention, the concept of ‘significant harm’ shapes the point at which local authorities have a duty to ‘make enquires’ to safeguard or promote a child’s welfare under Section 47 of the Children Act 1989, as well as the point at which a child may be placed in a local authority’s care under Section 31 of the Act. Harm in this context is defined as “ill-treatment or the impairment of health or development, including, for example, impairment suffered from seeing or hearing the ill-treatment of another” (Section 31(9)). The process by which child protection investigations are undertaken is not set out in legislation, but in the regularly-updated statutory guidance, *Working Together to Safeguard Children* (HM Government, 2018b). According to this guidance, when a child welfare/child protection referral is received by a local authority, a social worker must acknowledge the referral and decide what action is required within one working day. If immediate action is not required, but further assessment is needed, this must be completed within 45 days in line with a national assessment framework (Department of Health, Department for Education and Employment, & Home Office, 2000). The rationale for the assessment is to determine whether: i) the child may be suffering, or is likely to suffer significant harm (Section 47); ii) the child is “in need” of support, but does not meet the threshold for child protection described above, in which case the local authority is required by law to provide services appropriate to meet that child’s needs (Section 17); or iii) the child and family may be supported through non-statutory early help support or universal services.

In support of the above child protection processes guided by the Children Act 1989, the Children Act 2004 sets out the duties placed on local authorities and

partner agencies to co-operate to promote children's welfare. Although there is currently no 'mandatory reporting' requirement in England - that is, no legal requirement to report suspected cases of child abuse or neglect - under Section 11 of the Children Act 2004 all professionals who work with children are required to safeguard and promote children's welfare, which in practice means reporting any child welfare concerns in line with statutory guidance (HM Government, 2018a, 2018b). A further piece of legislation relevant to the child protection system in England is the Children and Families Act 2014, which introduced a 26-week timescale for care, supervision and other family court proceedings. Following enactment of this legislation, concerns were raised about the increased pressure social workers, local authorities and the courts would be under to meet the 26-week timescale for complex cases involving child removal (Welbourne, 2014). Similarly, moves to increase the number of adoptions in England, introduced in 2012 through the government's 'action plan for adoption' (Department for Education, 2012), were criticised by family rights proponents and other professional groups. For example, in 2016, BASW launched an enquiry into the role of social workers in adoption, "with a particular focus on how ethical issues and human rights legislation are understood and inform practice, and how these relate to pursuing good long-term outcomes for children and their families" (British Association of Social Workers, 2016). The resulting report from this enquiry questioned the lack of debate around the increased use of adoption within the context of austerity policies and growing levels of family poverty, as well as the disproportionate impact of adoption on disadvantaged birth families (Featherstone, Gupta, & Mills, 2018). England's present policy on adoption, and non-consensual adoption in particular, stands in clear contrast to approaches in

Finland, where adoption is not recognised as a formal child protection measure (Pösö & Huhtanen, 2016).

Despite the reforms described above, social work practice in England continues to be influenced by the overriding belief that children's welfare is paramount and that children are best supported within their family (Department for Education, 2015). Yet, while there is a strong legislative and practice commitment to supporting families, Burns, Pösö, and Skivenes (2016a) have suggested that England's previous shift towards the 'service orientation' has not been realised, as in practice, child protection remains predominantly risk-orientated. However, this assessment must be seen in the context of England's unique socio-political environment, including the frequently negative media narratives surrounding social work and child protection practice; see Warner (2015). Similarly, the emphasis on risk within social workers' practice may be connected to the growing pressures on local authorities, including the prospect of poor ratings from social work regulators combined with the threat of central government intervention for "failing" local authorities (Prime Minister's Office, 2015).

3.2.3 The relationship between families and social workers

The legal frameworks surrounding child protection in England, discussed above, highlight the paramount importance of protecting children's welfare above all else alongside the requirement to provide support to children in need and their families. In practice, however, it has been suggested that the state/parent relationship in England may be viewed as 'adversarial', with too many families in

need of support being subject to accusatory child abuse procedures (Berridge, 1997; Gilbert, 1997). This characterisation was also discussed by Rachael Hetherington, informed by her cross-national research with colleagues at Brunel's Centre for Comparative Social Work Studies during the 1990s:

In England, a very high proportion of social work in child welfare takes place within the area of semi-compulsion. This is because, at the 'voluntary' end, shortages of resources and an emphasis on minimum intervention combine to make it likely that little or no help will be provided for families where there are no child protection concerns. Intervention is legitimated by considerations of 'risk'. (Hetherington, 1998, p. 79).

Since this assessment, research by Spratt and Callan (2004) identified a continued apprehension among many parents towards social work involvement, while almost half of the parents interviewed in research by Dale (2004, p. 143) reported that they were uncertain about the helpfulness of child protection services, or judged that child protection services "did not really help" or even "made things worse". While it is possible that relationships between families and social workers in England improved between 1997 and 2010 as a result of the refocusing debate and greater investment in family support services, the reality is that at present, very few families self-refer for support. According to the figures released by the Department for Education concerning the period between 2016/2017 (Department for Education, 2017a), police forces were the source of the highest percentage of child welfare referrals, followed by schools, health and other local authority services. 'Individuals' constituted just 8.2 per cent of referrals; this includes referrals from extended family members and acquaintances, and therefore the

actual percentage of self-referrals in England is likely to be considerably lower. Moreover, of all looked after children in England in the year ending March 2017, only a minority (23 per cent) were looked after by a voluntary arrangement (Department for Education, 2017c). This figure contrasts markedly with statistics from Finland, where around 75 to 79 per cent of children are looked after through voluntary arrangement (Berrick et al., 2015, p. 369). While acknowledging the difficulty of comparing data sets cross-nationally, the figures appear to suggest that families in England are much less willing to approach social services for support compared to families in Finland. This, in turn, could affect the extent to which social workers are able to respect families' rights to self-determination in England, potentially creating additional ethical challenges for social workers.

3.3 Child welfare and child protection in Finland

The following section of the chapter explores the literature relating to child welfare and child protection practice in Finland. Finland has been described as a leader in child welfare practice due in part to the country's low levels of child poverty and world-renowned education system (Hiilamo, 2009; UNICEF Office of Research, 2013). Despite this standing, within the country some scholars have highlighted a growing level of public concern for 'Finnish childhood' (Forsberg & Ritala-Koskinen, 2010), while others have questioned the extent to which Finland's approach to child welfare may accurately be described as family service-orientated in view of recent policy changes (Gilbert, 2012; Pösö, Skivenes, & Hestbæk, 2014).

3.3.1 Developments in child protection in Finland

The foundations of Finland's current approach to child welfare and child protection can be traced to the post-War period, when the ideas of social democracy and the 'Nordic model' of welfare became firmly established. New social security policies including income transfers and family benefits helped to advance broader child welfare support during this period, while important theoretical and practice developments in child care were also introduced, informed by a growing academic research-base (Hämäläinen & Niemelä, 2000). During the 1980s, ideas surrounding the 'new sociology of childhood', which rejected dominant perspectives on childhood from developmental psychology debates, also increased in influence in Finland as growing attention was paid to children's individual rights (Hämäläinen, 2012, p. 135). In this context, the Child Welfare Act 1983 introduced a wider frame for child welfare and child protection, shaped by central principles including the promotion of welfare and the best interests of children (Hearn et al., 2004). Though the Child Welfare Act 1983 was a 'frame law', in the sense that it offered principles but no detailed statutes, it nevertheless helped to underscore the role of social work as the key profession in child welfare matters (Hämäläinen, 2012, p. 137). Additionally, the legislation first introduced 'open care' as the primary child welfare intervention and helped to clarify the types of services families could expect to receive from the state.

A critical turning point in the development of Finland's child welfare system was the economic recession of the 1990s and resulting banking crisis. As noted by several authors (Hämäläinen & Niemelä, 2000; Satka & Harrikari, 2008; Satka et al., 2007; Vornanen, Hämäläinen, & Pölkki, 2011), the recession had a profound and lasting impact on social and welfare policies in the country, including policies relating to child welfare support, as demand for social services

increased while tax revenues and public spending decreased. It was within this context that the concept of ‘early intervention’ first entered Finnish child welfare terminology (Hämäläinen, 2012, p. 141). The privatisation of child welfare services also increased, while within wider public and media discourses, growing concerns for ‘children’s illfare’ (*lasten pahoivointi*) began to emerge; this term has been described in English as an umbrella concept describing poor welfare outcomes for children, such as psychological ill health or increased family difficulties (Forsberg & Ritala-Koskinen, 2010, p. 50). Significantly, the apparent growth in ‘illfare’ was attributed in policy debates not to growing family poverty, but to increased “parental negligence and disregard for the children’s needs” (Alanen, Sauli, & Strandell, 2004, p. 182), and represented a shift in public perceptions around Finland’s status as a world leader in child welfare matters.

In the 2000s, in light of growing concerns about the state of child welfare and calls to strengthen children’s rights in line with the United Nations Convention on the Rights of the Child (1989), an updated Child Welfare Act was passed to replace the frame law of the 1983 Act. The Child Welfare Act 2007 introduced significant changes for social work professionals, including new timescales for conducting child welfare assessments (Section 26) and clearer processes regarding child removal. According to Gilbert (2012), this formalisation of procedures and increased regulation may be seen as evidence of a change in approach in Finland, towards a greater child protection focus. However, Pösö (2011) has argued that the Child Welfare Act 2007 instead signalled a move towards a more child-centred approach to child welfare, shifting professional emphasis towards support for children as individuals, rather than support for children within the family unit. An example of this may be seen in debates

surrounding children's permanence. As discussed above, unlike in England, adoption is not currently classified as a child protection measure in Finland (Pösö & Huhtanen, 2016), however there are currently proposals to increase the possibility for some children to be permanently taken into care if there is no realistic possibility of reunification (Törrönen, Vornanen, & Saurama, 2016, p. 254). This, in effect, could be seen as a measure aimed at promoting children's rights by enabling permanence, while reducing the rights of birth families. Applying Fox Harding's value perspectives analysis to this Finnish policy, it may be possible to identify a shift in approach towards the perspective of 'children's rights and child liberation', and away from the 'modern defence of the birth family and parents' rights' (Fox Harding, 1997, p. 9).

3.3.2 Legislation and policy in Finland

A key objective of Finland's Child Welfare Act 2007 is "to protect children's rights to a safe growth environment, to balanced and well-rounded development and to special protection" (Section 1). The reference to children's rights is perhaps an indication of how the legislation has been influenced by the United Nations Convention on the Rights of the Child (1989) and again highlights the growing child-focus within Finland's child welfare system (Pösö, 2011). Section 4 of the Child Welfare Act 2007 goes on to highlight how child welfare and well-being should be promoted, with the requirement that "[w]hen assessing the need for child welfare and in the provision of child welfare, it is first and foremost the interests of the child that must be taken into account". This phrasing arguably bears resemblance to the 'paramountcy' principle of England's Children Act 1989, and Sinko (2008) has further suggested that the child protection assessment

model introduced in Finland by the 2007 Act was loosely based on England's *Framework for the Assessment of Children in Need and their Families* (Department of Health et al., 2000); highlighting a possible convergence in practice approaches between the two nations as result of the updated legislation.

As regards when social workers in Finland are required to intervene to protect children, unlike the English legislation which includes reference to the threshold concept of 'significant harm', the Finnish Child Welfare Act 2007 includes no direct mention of, or definition of what may be considered child maltreatment or abuse. Rather, such concepts are referred to indirectly in respect of specific interventions; for example, the need for an emergency placement should occur when a child's "health or development is seriously endangered by lack of care or other circumstances" (Section 40, Child Welfare Act 2007). As regards the process of assessment and intervention, once a municipality has received a referral or 'notification' under Section 26 of the Child Welfare Act 2007, a social worker must immediately decide whether there is a need for urgent child welfare support. If a child is deemed to be in immediate danger, the social worker *alone* may authorise an emergency placement for the child for up to 30 days (Section 30). This provision contrasts with the legislation in England, where court authorisation is required to place any child in care (with the exception of removals of up to 72 hours made under police protection) and demonstrates the relative discretionary power of social workers in Finland. During the initial assessment, if urgent support is not required, the social worker must decide within seven days whether there is a need to investigate the concerns further. Following this, the social worker will have three months to complete a full child welfare assessment. If the decision is made that the child should remain a child welfare

“client” after this assessment, the social worker is required to draw up a “client plan” (Section 30), which must include the actions to be taken to support the child and their family through ‘open care’ measures.

Alongside the above, Finland’s Child Welfare Act 2007 also includes the duty for certain professionals to ‘notify’ social services if they suspect there may be a need for child welfare support (Section 25); a duty commonly referred to as ‘mandatory reporting’ (Gilbert, 1997), and something that is absent from English legislation. Another difference is the inclusion of the requirement, placed upon Finnish municipalities, to “provide preventative child welfare... with the aim of promoting the wellbeing of children and young people when a child or a family is *not* a client of child welfare services” (Section 3a, Child Welfare Act 2007, emphasis added). In effect, this means that in addition to assisting children and families identified to be in need of child welfare support, municipalities are required to provide preventative services to *all* children and families in their region. In England, local authorities are only mandated to “safeguard and promote the welfare of children” (Section 11, Children Act 2004), meaning there is no similar duty to *provide* services or support unless a child has been assessed as in need under Section 17 of the Children Act 1989, or deemed to be at risk of significant harm. Furthermore, the Finnish Child Welfare Act 2007 (Section 36) explicitly sets out the types of services municipalities are required to provide to children and families through ‘open care’. These services include financial support, a support person or family, or placement of the child or family in temporary institutional care.

The differences highlighted above arguably support the portrayal of Finland’s child protection system as more family service-orientated than the

English system, as characterised in Gilbert's (1997) original analysis. In addition, Finland's newly amended Social Welfare Act 2014 has extended families' rights to request preventative support, outside of formal child welfare processes (Tanninen, 2015), while the LAPE reform introduced in 2016 has signalled a further commitment to increasing preventative services for families (Ministry of Social Affairs and Health, 2016). These moves could be seen as evidence of a continuation of the family service orientation in Finland, something which has occurred alongside, and in support of moves to strengthen child protection procedures as well as children's rights (Gilbert, 2012; Pösö, 2011).

3.3.3 The relationship between families and social workers

According to Gilbert's (1997) original typology, family service-orientated child welfare systems may be characterised by a state-parent relationship based on partnership and support, as opposed to the more adversarial relationship associated with child protection-orientation systems. In Finland, which Gilbert (1997) characterised as family service-orientated, it may be possible to situate this apparent partnership in the context of the historical foundations of the Nordic welfare state, which afforded individuals and their families a relatively high standard of living through an "all-embracing social service" (Blomberg et al., 2010, p. 30). In their chapter on the Nordic model of child welfare, Blomberg and colleagues highlighted the relatively positive relationship between individuals and the state, a phenomenon which has also been noted in previous political and historical analyses (Kettunen, 2010). According to Blomberg et al. (2010, p. 34), within the Nordic nations "[f]amilies are thought to expect state help and to trust social workers, and within this context mandatory reporting can be seen as a

means of ensuring that help is made available.” It is therefore possible that the presence of mandatory reporting in Finland may assist the relationship between professionals and families, as parents may find it easier to accept a child welfare notification because there is a clear legal obligation for professionals to refer children for support.

The forms of ‘preliminary intervention’ used in Finnish child welfare are also relevant for understanding the nature of the state-parent relationship in the country. According to Gilbert’s (1997) analysis, family service-orientated systems are characterised by therapeutic interventions grounded in the assessment of need, in contrast to the more legalistic and investigatory interventions adopted within child protection-orientated systems. In Finland, where there is a lower threshold for state support, particularly following implementation of the recent Social Welfare Act 2014, interventions are clearly grounded in this family service, needs assessment-model of intervention. This can be demonstrated through the description offered by Vornanen, Pölkki, Pohjanpalo, and Miettinen (2011, p. 21): “Child welfare in Finland is based on the principle of mild intervention, which means that the mildest ways of interventions come first, and the strength of measures gradually increases if there is a need for stronger interventions.” In this way, families with low-level needs may feel reassured that any involvement with social services will be ‘mild’ and supportive, rather than intrusive, again supporting a more positive relationship between children, families and social workers as compared to England.

As regards self-referrals for support, the comparative study by Blomberg et al. (2010, p. 37) observed that 26 per cent of referrals received in a sample of Finnish municipalities were “non-mandate”; that is, they were received when

clients had sought help on their own initiative. This is a significantly higher figure than in England (see section 3.2.3) and again helps to evidence the suggestion that the relationship between families and social workers in Finland is more positive and grounded in partnership. As also discussed in section 3.2.3, rates of voluntary care orders are around three times higher in Finland than in England (Berrick et al., 2015; Department for Education, 2017c), again suggesting that families are more willing to accept the support and intervention of social services in private family life.

While the rates of voluntary care orders may be seen as evidence of a more trusting relationship between families and social services, Pösö and Huhtanen (2016, p. 31) have raised concerns that an element of ‘coercion’ may also lie behind many voluntary care orders in Finland, and therefore it is necessary to be critical when comparing figures cross-nationally. In a recent article on this same subject, Pösö, Pekkarinen, Helavirta, and Laakso (2018) differentiated between ‘strong’ and ‘weak voluntarism’ in respect of care orders, the latter of which may include decisions where “the parents and/or children are hesitant about the need for the care order or the choice of the placement. Yet they do not formally contest the care-order proposal” (Pösö et al., 2018, p. 262). Among a sample of 37 care orders examined in the study, Pösö and colleagues categorised almost a third of the care orders as falling within this category of ‘weak voluntarism’. This suggests that the relatively high numbers of voluntary care orders in Finland may not necessarily signify more positive relations, as disagreements between families and social workers may be hidden from the statistics. Moreover, a comparative study by Littlechild (2005), discussed in chapter two, identified that in both the English and Finnish contexts child protection social workers have reported

experiencing threats, aggression and even violence from parents, again implying a more adversarial relationship than that characterised in other analyses (Gilbert, 1997). The recent children's 'illfare' narrative discussed by Forsberg and Ritala-Koskinen (2010), and Alanen et al. (2004), may too indicate that the apparent partnership between families and social services in Finland is changing in the context of growing concerns about the involvement of children in the child welfare system. Indeed, in contrast to other nations, an important trend in the Finnish child welfare system in recent years has been the rising number of children entering the care system (Hiilamo, 2009). This a trend has described as a "puzzle" by Burns, Pösö, and Skivenes (2016c, pp. 227-228), in light of Finland's greater emphasis on and investment in preventative support measures, and may signify that thresholds for removal in the country are lower than in other contexts. This once again suggests that the portrayal of Finland's child welfare system as family service-orientated may be too simplistic given the complexities of practice realities and child welfare outcomes in the country.

In summary, this chapter has provided additional detail regarding the legal, policy and practice contexts surrounding child welfare and child protection in England and Finland, by focusing on recent policy developments, current legislation and policy guidance, and the relationship between children, families and social workers in the two nations. Applying this knowledge, along with findings from the literature review, the next chapter of the thesis describes how key messages concerning the complex and dynamic child protection systems in England and Finland have contributed to the formulation of the research questions, research design and methods for the empirical study.

Chapter Four

Study Design and Methods

4.1 Introduction

In this chapter I introduce the research design for the study, as guided by the central research problem and insights gained from the literature review and analysis of the English and Finnish child welfare contexts. The aim of this chapter is to describe my research approach and to demonstrate how and why the chosen methods of data collection and analysis are well suited to this research study. To achieve this, I first introduce the theoretical ideas and perspectives that have informed my analysis. I then describe my data collection and analysis procedure and explain my decision to conduct a qualitative analysis based on practitioner interviews, partially structured around case vignettes. Finally, I describe how ethical considerations impacted my study and offer reflections on the overall study design.

4.2 Research aims

As discussed, the central research problem guiding this study is the question of how child protection social workers in England and Finland make decisions and engage with ethics during this process. On the basis of this problem I constructed the following four research aims, which shaped the study methods and research design:

1. To gain an understanding of how child protection social workers in England and Finland approach decision-making.
2. To gain an understanding of how child protection social workers in England and Finland engage with ethics.
3. To compare data from England and Finland in respect of aims 1 and 2, to identify if there are similarities and/or differences between the samples.
4. To reflect on possible explanations for any identified similarities and/or differences between the English and Finnish data.

The research aims were developed based on the findings of chapters two and three. For instance, the first research aim, ‘To gain an understanding of how child protection social workers in England and Finland approach decision-making’, was shaped by evidence from the literature which indicated that discernible national differences may be observed in how social workers approach decisions (Benbenishty et al., 2015; Berrick et al., 2016b). However, other studies have emphasised that differences may also be observed at an individual level related to factors such as professional experience and personal values (Benbenishty et al., 2002; Drury-Hudson, 1999; Rosen, 1994). Moreover, while intuitive reasoning has been shown to play an important role in social work decision-making (Hackett & Taylor, 2014; Sheppard & Ryan, 2003), the extent to which national context impacts on this type of reasoning remains unclear. For these reasons, I constructed the first research aim as I considered it necessary to explore the mechanisms and processes social workers in the two nations use when making decisions, and how this affects practice actions.

Regarding the second research aim, ‘To gain an understanding of how child protection social workers in England and Finland engage with ethics’,

through my experiences of social work education and practice in England, it seemed that explicit engagement with ethical questions and debates appeared to diminish in the workplace, outside of the ‘classroom’ setting. I wanted to investigate this anecdotal observation to find out whether this apparent phenomenon was an accurate feature of the English child protection system, and/or was present in other contexts. This first-hand experience was a key factor in my decision to undertake this study, and to specifically consider the subject of ethical engagement in child protection social work. Regarding the research literature on social work ethics, it has been suggested that differences exist in how individual practitioners comprehend ethically difficult situations and prioritise ethical principles (Banks & Williams, 2005; Harrington & Dolgoff, 2008; Landau & Osmo, 2003). However, only limited research has explored whether practitioners’ ethical perspectives vary in different national contexts (Meysen & Kelly, 2018), and it is therefore unclear whether ethical engagement is a largely individualised activity or something influenced by social workers’ contextual environments. As such, I constructed the above research aim with the intention of learning more about if, how, and the extent to which individual social workers in the two nations engage with ethics in their everyday practice decision-making.

The third research aim, ‘To compare data from England and Finland in respect of aims 1 and 2, to identify if there are similarities and/or differences between the samples’, was designed to integrate an explicit process of comparison into my study. In previous comparative analyses, England and Finland have been characterised as having contrasting child protection system orientations (Burns, Pösö, & Skivenes, 2016b; Gilbert, 1997). Therefore, it could be inferred that data relating to aims one and two may reveal differences in how English and Finnish social workers reflect on cases and approach child protection decisions. However,

other studies have indicated that there have been growing similarities in child welfare practice in England and Finland in recent years (Gilbert, 2012; Gilbert et al., 2011b); this suggests that differences between the two nations may be less distinct. In addition, and as discussed above, my review of the research literature identified few studies that had directly considered social workers' ethical perspectives from a comparative perspective, suggesting that little is currently known about if and how national contextual factors affect social workers' ethical engagement. The above research aim therefore provides the basis for the comparative element of my study. It was constructed both to provide original data on the subject of comparative social work ethics, and to shed light on ongoing debates regarding child protection system convergence, specifically in relation to England and Finland.

Finally, research aim four, 'To reflect on possible explanations for any identified similarities and/or differences between the English and Finnish data', was designed to integrate discussion and reflection into my study. In the beginning stages of planning I purposefully developed my central research problem in the form of a 'how' rather than a 'why' question, as I wanted to offer an exploratory insight into the characteristics of child protection decision-making as a first step to the "development of theory from data" (Stebbins, 2001, p. 5). As such, I considered that it would be useful to reflect on the possible causal mechanisms for any observed differences or similarities within the English and Finnish data, in the interests of assisting theory development and informing future research. As discussed by May and Perry (2011), one of the key advantages of comparative research is the fact that the identification of difference can directly assist this process of theory generation, and these theories that can then be tested and enhanced through further investigation. As so little empirical research

currently exists on the subject of comparative social work ethics in particular, I constructed the above research aim as I judged that it would be beneficial to reflect on what my research findings could reveal regarding the possible causes of difference or similarity in this area.

In addition to shaping the above research aims, the empirical literature discussed in chapter two also revealed the wide variety of methodological approaches used for exploring social work decision-making and ethics, and for comparing practice cross-nationally. For example, some studies adopted quantitative research designs, more in line with the positivist research tradition (Benbenishty et al., 2015; Stokes & Schmidt, 2012), while others used interpretive, qualitative methods (Keddell, 2011; Rossiter et al., 2000). As such there were a number of options available to me when deciding on my study's research design. To explain the rationale for my chosen design - a qualitative analysis based on one-to-one interviews with social workers, structured partially around case vignettes - in the following section I discuss some of the theoretical ideas which shaped my thinking in respect of the knowledge production and research process.

4.3 Theoretical orientation and the comparative approach

Though child protection decisions in England and Finland are guided by clear legislative and policy frameworks, as discussed in the literature review, social work decision-making itself is a highly personalised activity, due in part to the interpersonal nature of the work, processes of individual cognitive deliberation, as well as cultures of increased personal accountability present in both the English

and Finnish contexts (Munro, 2004a; Vornanen, Pölkki, et al., 2011). Therefore, in order to explore the activity of decision-making and how social workers reflect on ethical issues during this process, my research design needed to take into account how social workers *individually* construct the world around them, and provide a means to capture their personal views and perspectives on child protection issues and the forms of state intervention needed. For this reason, at an early stage of the research process I chose not to adopt an approach rooted in the theoretical perspective of positivism, aligned more with quantitative methods and based on the ideas of empiricism, the unity of human experience and objectivism (Delanty & Strydom, 2003). Instead, I considered that a broadly interpretivist approach, based on qualitative methods, would offer a more suitable means of obtaining information about individual social workers' views, particularly when exploring perspectives on ethics, which, as discussed by Landau and Osmo (2003), can be highly subjective and dynamic.

Qualitative research methods rooted in the interpretivist tradition are fairly common in social work research (Forsberg & Vagli, 2006; Keddell, 2011; Witkin, 2011). However when investigating social work practice it is important to recognise the significance of the structures that shape individuals' constructions of reality. So, while individual social workers may develop contrasting interpretations of the world around them, it is also relevant to consider the fact that their interpretations will have been shaped by multiple external power dynamics, acting at various interacting levels (D'Cruz, 2004). For this reason, Houston and Campbell's (2001) conceptual analysis provides a useful framework for exploring how social workers approach decision-making cross-nationally. Applying the ideas of critical theory, specifically Habermas' (1984) theory of

communicative action, Houston and Campbell proposed a layered approach for understanding how the ‘lifeworld’ and ‘system’ interact to shape human behaviour, through distinct social domains. In particular they suggest that examining the ‘macro’, ‘mezzo’ and ‘micro’ social domains respectively provides a structure for understanding how practice is influenced and shaped at different interacting scales:

The macro domain refers to large-scale international social processes directly affecting nation-states and indirectly affecting local social work practices within them... The mezzo domain can be viewed as the site where relationships between the nation-state, welfare regimes and social professionals are played out... [T]he micro domain alludes to the specific activity of everyday social work practice, where academic discourses become transformed into ‘‘practice wisdom’.’ (Houston & Campbell, 2001, p. 68)

Houston and Campbell’s ideas have clear relevance to my own study given its comparative focus, as well as the suggestion in existing literature that forces interacting at different scalar levels can influence the decision-making behaviours of social workers (Keddell, 2014). Moreover, as discussed by Keddell (2014) and other authors, including Hämäläinen (2014), due to the way in which power structures evolve and influence organisations and individuals over time, it is also necessary to consider how historical developments have shaped contemporary cultural and political attitudes. This argument highlights an unavoidable problem of cross-sectional, as opposed to longitudinal or historical comparative designs, as the conclusions of cross-sectional comparative studies may become less accurate as policies and practices in any context change over time. This does not invalidate

the worth of undertaking cross-sectional comparative research, however. For example, the two analyses by Neil Gilbert and colleagues (Gilbert, 1997; Gilbert et al., 2011b) demonstrate the value of replicating comparative studies at appropriate intervals. These studies have helped to demonstrate how international child welfare policies and practices have evolved and shifted, and this process of reflection may in turn help to shape future policy directions.

Therefore, comparative research can play a central role in developing knowledge and understanding about the nature of social work activity internationally. Yet there are a number of practical, methodological and ethical challenges associated with the comparative research approach, not least the issue of capturing the impact of temporal change, as discussed above. One issue, for instance, is the question of the motivation or purpose of the study. Baistow (2000) has stressed the importance of learning as the central motivation for conducting comparative social work research, and identified four distinct approaches to learning in cross-national investigations. First, learning *about others* involves producing a descriptive account of policy or practice in different contexts, with the intention of exposing the audience to new practices or ways of thinking. Second, learning *from others* involves identifying examples of good practice in different settings, with the express intention of copying ideas to implement domestically. Third, learning *with others* involves the development of international research networks, with the aim of encouraging an exchange of ideas to improve cross-national understanding and co-operation. Finally, learning *about ourselves* allows us to deconstruct and reflect upon the structures of own systems, informed by knowledge of alternative systems. This latter approach was discussed by Rachael Hetherington in her reflective account, *Learning from Difference*:

Comparing Child Welfare Systems (2002), in which she argued that comparative research can help us to challenge accepted beliefs or attitudes in our home nations: “We can begin to identify the ‘taken-for-granted’. This may lead us to question some of the assumptions on which our system rests and to become more aware of the aspects of our system that we value most highly” (Hetherington, 2002, p. 1). In the same way, Duncan (1999, pp. 4-5) has suggested that such processes of ‘generalisation checking’ can help to support the ‘shock’ role of comparative research, which can facilitate, politically, the aim of learning by clearly demonstrating how things can be done differently and improved. Incorporating self-reflection into this process is essential, however, as this reduces the potential for problems associated with simplistically transporting policies from one context to another; something Adams, Erath, Shardlow, and Sing (2000) have suggested is neither possible nor desirable. Instead, Adams et al. (2000) argue that to achieve successful and meaningful comparative analysis, a deep understanding of social work and how it operates at the regional, national and cultural levels is needed, and from this certain shared ethical and professional commitments may be identified.

Aside from purpose or motivation, the actual process of conducting comparative social work research can be challenging due to the multiple layers of analysis required (Houston & Campbell, 2001; Meeuwisse & Swärd, 2007), compounded by the fact social work itself can be a complex and “messy” area for research (Jones, 1985, p. 172). The question of research ethics is also important, particularly given claims of professional imperialism (Midgley, 1981) when comparing practice across developed and developing contexts. Though my own study is a comparison of two economically developed European nations, such

questions are still relevant given my personal perspective as an English social worker, researching ‘the other’. Yet, as my research approach is influenced by the interpretivist tradition, my intention is not to achieve objectivity but to instead reflect on potential biases and attempt to reduce them where possible when analysing, interpreting and presenting my findings.

Wider epistemological challenges associated with the comparative research approach include the appropriateness and equivalence of the chosen methods and units of analysis (May & Perry, 2011). Specifically, appropriateness describes the methods used and how concepts are understood in each context. A comparative analysis of ‘open care’ policy in Finland and England, for example, may be impracticable because of the difficulty of reaching a suitable English translation and shared understanding of what the Finnish concept of ‘open care’ describes (Pösö, 2014). Equivalence then involves ensuring that data can be reliably compared. For instance, comparing statistics on children in care in England and Finland can be difficult due to the dissimilar ways in which these statistics are collated in the two countries (Burns et al., 2016b, p. 227). For these reasons, when developing my own research design I chose to explore child welfare and children protection practices in the broad sense to reduce the potential for conceptual misunderstanding. Additionally, I chose to base my analysis on qualitative interview data to avoid problems associated with obtaining equivalent secondary data from diverse international sources.

Related to the above, a further challenge of conducting comparative research can be linked to language, particularly when undertaking research in different linguistic contexts. By way of illustration, within her thoughtful commentary on the difficulties of translating Finnish child welfare terminology

specifically for an English audience, Tarja Pösö has argued that: “English terms, related to a different child welfare ideology and history, do not meet the essence of the Finnish welfare-focused child welfare system” (Pösö, 2014, p. 616). An example includes the term *lastensuojelu*, which, as discussed in chapter one of this thesis, most closely translates as ‘child welfare’ in English but has a broader meaning in Finnish. For these reasons Pösö has argued that it may be more appropriate for terms such as *lastensuojelu* to be left untranslated. As I am not fluent in Finnish, when developing my research design I was aware that I would be largely dependent upon English translations both when completing the literature review and when collecting my data. I was therefore conscious of the need to take steps to maximise equivalence of meaning, and so focused my literature review analysis on peer-reviewed studies to ensure a degree of quality control. When developing the design for my empirical study, in view of my interpretivist-inspired approach, I opted to obtain data from semi-structured interviews with social workers rather than using a quantitative data collection method. A benefit of this approach, from a language perspective, is that it would provide an opportunity for both the researcher and participants to ask questions if anything was unclear, to enhance shared understanding. Additionally, I accessed translation support from two experienced academics from the University of Eastern Finland, who agreed to be present during the Finnish interviews and who each had a background in child welfare social work. Due to their level of linguistic expertise and excellent subject knowledge, I was confident that the interview translations would be of high quality, though inevitably, some meaning would be lost through the translation process. Further discussion regarding my decisions surrounding the translation process, and the challenges I faced related to language, are discussed in sections 4.4.4 and 4.7.

Overall, though there are several challenges associated with the comparative research approach, on balance I came to the view that a comparative empirical study was feasible as taking steps to reflect on one's research aims and theoretical approach to recognise and reduce bias, while maximising data comparability, can help to enhance the validity of any comparative study. These steps are vital given the potential value of comparative social work research for supporting learning and improving knowledge and understanding internationally (Baistow, 2000).

4.4 Methods

In the following section of this chapter I outline and justify the specific research design adopted for this study: a qualitative analysis based on one-to-one interviews with social workers, structured around case vignettes.

4.4.1 Sample

Purposive sampling was necessary for this study given its focus on the behaviours of a particular population group. Purposive sampling is a method which sees the researcher "seek out groups, settings and individuals where... the processes being studied are most likely to occur" (Denzin & Lincoln, 2017, p. 312). This approach was used to identify qualified social workers working in the specific field of child welfare and child protection, as opposed to unqualified workers, managers or social workers employed in different fields. A limitation of purposive sampling is the fact that the results usually cannot be generalised; for example, the results of this study cannot be used to describe how *all* social workers might approach

decision-making or may think about ethics. However, in view of my interpretivist-inspired perspective, my aim was to not to produce generalisable results but to produce rich qualitative data, to allow me to explore individual social workers' unique rationales for their decisions and conceptualisations of ethical issues.

Unqualified and unregistered workers were omitted from the study, though it is acknowledged that family support workers in England, and *sosionomi* in Finland, play a vital role in child welfare and child protection processes. The reasoning for this omission is the fact that in both Finnish and English policy (Child Welfare Act 2007; HM Government, 2018b), social workers are explicitly referred to as the professionals responsible for conducting assessments and making decisions in response to child welfare referrals/notifications. In addition, although social work managers may be heavily involved in practice decision-making, they were similarly excluded due to evidence identified in the literature review that suggested Finnish social workers may be granted more discretion and independence from their managers relative to English social workers (Berrick et al., 2015; Hearn et al., 2004). I therefore wanted to explore, from the social workers' own perspectives, whether or not this was the case.

When I began the data collection I aimed to recruit around ten to fifteen social workers from each country, in keeping with the sample size of similar qualitative, vignette-based studies (see Wilkins, 2015). I also aimed to recruit equal numbers from England and Finland to increase the comparability of the data set. However, as the data collection progressed I found it more difficult to recruit English social workers; ultimately it took nine months to obtain sufficient data for my English sample compared to four months in Finland. This was something unexpected, as I had presumed the language barrier would have made recruitment

in Finland more challenging than in England. Although this issue did not impact on my results overall, I have reflected on the possible reasons for why recruitment in England proved more challenging in section 4.7.

4.4.2 Sites

The social workers in England were recruited from four local authorities in the North and Midlands via a teaching partnership between local universities and regional social work employers. One of the local authorities (LA2) has been described as ‘predominantly urban’ in a national population survey, while the remaining sites have been described as ‘predominantly rural’ (LA1) and ‘significantly rural’ (LA3 and LA4) respectively (Office for National Statistics, 2016). As regards demand for child welfare services, the rates of children in need in LA1, LA3 and LA4 were below the national average at the time of data collection, while the rates in LA2 were significantly greater than the national average for the year ending March 2017 (Department for Education, 2017a). The numbers of children in care revealed a similar pattern, with LA1, LA3 and LA4 below the national average of 62 looked after children per 10,000 children (equating to 0.62 per cent), compared to LA2, which had a rate considerably greater than this figure (Department for Education, 2017c). Importantly, at the time of the data collection LA2 had recently adopted a ‘systemic’ approach to practice, similar to the ‘Hackney model’ discussed in the Munro Review (2011) and in the evaluation study conducted by Forrester et al. (2013). The organisation of practice in LA2 was therefore structured around small units or ‘pods’, consisting of a practice manager, two social workers, a social work assistant and a unit coordinator who worked together as a team to jointly support children and

their families. This approach contrasts with the traditional organisation of child protection teams in England which generally consist of a team manager, a small number of deputy team managers, several social workers and social work assistants, each working in a hierarchical line of accountability.

In Finland, social workers were recruited from three municipalities in the East and South of the country. The three sites were each described as ‘urban municipalities’ in recent research (National Institute for Health and Welfare, 2015), however it should be noted that the municipalities had, at the time of data collection, lower populations than the four local authorities in England, reflecting a broader difference in population density between the two nations. As regards demand for child welfare services, the municipalities each had similar child placement rates, with between 1.3 and 1.5 per cent of children aged 0-17 placed in care; close to the national average of 1.4 per cent (National Institute for Health and Welfare, 2015). There was more variation in the rates of children receiving child welfare interventions, however, with M1 and M2 having rates similar or below the national average, while in M3, eight per cent of children received child welfare interventions, compared to six per cent nationally (National Institute for Health and Welfare, 2015). As regards organisational practices, all three municipalities practiced joint-working, whereby social workers would assess children and their families jointly with an unqualified family support worker, known as a *sosionomi*, or another social worker. Additionally, in all three municipalities the social workers had access to regular, team-based external supervision facilitated by an independent social work professional.

4.4.3 Data sources

Questionnaire

Though my principal method of data collection involved interviews partly structured around case vignettes, I also collected contextual information about my participants via a short questionnaire, which the participants completed by hand at the start of each interview. The questionnaire data was collected in order to develop a greater understanding of the participants' background, past employment and training in child welfare and child protection social work. The questionnaire was not intended for use as a statistical tool; rather it was used to capture the participants' demographic, professional and educational information in the event that any of these factors appeared to have some influence on the responses. Specifically, the questionnaire asked for the participants' age, the date of their social work qualification, time with their current employer, previous relevant work experience and other relevant education/training (see Appendix 9).

In view of my interpretivist research approach, the questionnaire data was relevant for building a picture of my participants' unique lived experiences; these experiences could be relevant when examining each participant's individual constructions of child protection social work and their professional role. Additionally, past studies have indicated that length of professional experience can have an impact on social workers' decision reasoning (Benbenishty et al., 2002; Drury-Hudson, 1999; McLaughlin et al., 2010). For this reason I considered it necessary to collect information about my participants' past work experience in particular, in order to explore whether there was any association between the participants' experience levels and the content and nature of their interview responses.

Vignettes

Vignettes have been described as “simulations of real events depicting hypothetical situations” (Wilks, 2004, p. 80), and are an established data elicitation method in comparative social work research (Guidi, Meeuwisse, & Scaramuzzino, 2016; Kriz & Skivenes, 2010; Soydan, 1995; Soydan & Stål, 1994; Williams & Soydan, 2005). When developing my research design, I was particularly attracted to this method as vignettes are well suited to cross-national studies, since the standardised text can promote a level of consistency in the structure of interview responses, which can then assist the process of data comparison and analysis. As noted by Wilks (2004), vignettes also allow participants to offer views and opinions in an indirect way, which does not challenge their personal practice. As I aimed to question social workers about their case decisions and ethical engagement, vignettes seemed to be an appropriate approach as they would help to distance the discussion from the participants’ real-world casework, and so potentially increase the openness of their responses, while reducing the possible influence of social desirability bias. Although vignettes can be easily adapted for quantitative research (see Stokes & Schmidt, 2012), Wilks (2004) has argued that vignettes are better suited to qualitative social work studies due to the richness of the data they can produce; as discussed by Wilks (2004, p. 85): “Real decision-making is socially situated and we ignore the linguistic repertoires of those involved in the resolution of dilemmas at our peril”. Since I aimed to explore my participants’ decision reasoning and ethical reflections from an interpretivist perspective, I concluded that qualitative analysis of the responses would provide the most suitable method for obtaining these ‘linguistic repertoires’. Moreover, vignettes have proven particularly useful for examining

the subjects of social work decision-making (Taylor, 2006) and moral reasoning (Finch & Mason, 2003), topics which are both central to my own study.

While there are a number of benefits to the vignette method, there are also challenges regarding the validity of the approach in terms of how accurately vignettes can reproduce real-world scenarios, and whether the responses given by participants are a true reflection of how they would respond or act in practice. For example, as discussed by Wilkins (2015, p. 400), social workers may be more cautious in practice than when responding to vignettes, as there can be an actual risk of harm to a child. However, by obtaining data through qualitative interviews, rather than using a quantitative survey-based approach, I judged that it would be possible to reduce issues around validity since the interview interaction would capture a greater level of detail in the participants' responses, which would allow me to more accurately analyse my participants' intended meaning.

For the above reasons, I judged that the vignette approach was an effective and suitable method for obtaining comparable data for this study. I therefore chose to construct two hypothetical vignettes which described initial child protection referrals, informed by examples from previous studies (Wilkins, 2015) and my own practice experience. Given my aim of exploring social workers' engagement with ethical issues, I specifically designed the vignettes to be representative of the types of ethical dilemmas I had witnessed while working in child protection social work. Moreover, as it has been suggested that countries within Europe and North America tend to encounter similar social problems (Gilbert, 1997), I was confident that the issues of suspected domestic abuse and child sexual exploitation, included within my two constructed vignettes, would be familiar to social workers in both England and Finland. Indeed, I was reassured of

this when participants from both samples commented on the realistic nature of the scenarios, both during the pilot and main study. For example, participants offered comments such as: "...quite often we do get this [scenario]" (Participant 5, England, referring to case 1) and "...I think this is a very, kind of like, normal case" (Participant 1, Finland, referring to case 2). The two constructed case vignettes used in my study are presented below and in Appendix 10.

Vignette One:

You receive a telephone call from Anna, an educational welfare officer in a local school. Anna informs you that she is concerned about one of the school's pupils, six-year-old Daniel, who recently told his teacher that he was tired because his mother, Kate, and her partner were arguing at night.

Daniel has been at the school for three months and Anna has met Daniel's mother Kate on four occasions. Kate approached Anna shortly after Daniel started at the school to ask if she could receive financial support from the school to buy furniture. The family receive welfare benefits and live in social housing. On another occasion, Kate appeared upset and told Anna that she previously had two children taken into care, although she was unwilling to say any more about this. The family do not have any relatives in the area.

Daniel has a sister, Emily, aged 18 months. Anna says that she has seen Emily three times (Anna does not know who was looking after Emily on one occasion). Emily is very quiet and small for her age. Emily does not attend day care. Anna spoke to Kate about putting a support plan in place at the school, however Kate refused this. Kate said she did not want help with caring for the children, she only wanted financial assistance. Anna has concerns about Daniel and Emily but has not told Kate that she

has contacted social services. Anna feels that Kate and the children need support but she is worried that Kate may not accept any help.

Vignette Two:

You receive a telephone call from a youth worker, Tom, who has concerns about the welfare of a 14-year-old boy, Sam, who attends his youth club. Sam has mild learning difficulties and has recently started talking to other boys online. Tom informs you that Sam shared explicit photographs of himself with another boy, who Sam says is aged 16 (however they have not met in person). Sam had an argument with the boy who threatened to put the photographs online and spread them around Sam's school.

Sam is extremely upset and threatened to commit suicide if anyone finds out about the photographs or the fact he is gay, particularly his teachers and his parents. Sam has insisted that Tom does not tell anyone about what has happened, however Tom felt he had a duty to report this to social services. Tom has not told Sam about the referral.

When constructing the above vignettes I purposefully designed each scenario to include an ethical dimension. In vignette one for example, Kate does not appear to want family support or intervention from professionals other than financial assistance, and there is no certain evidence that Daniel or Emily may be experiencing poor care or 'significant harm'. There are however inferences to possible domestic abuse, and the information indicates that Kate previously had children removed from her care. The question of Kate's right to self-determination and respect of her private and family life is therefore relevant, including the extent to which social workers can or should intervene in this case apparently against Kate's wishes. In vignette two, the information suggests that Sam is strongly

opposed to his parents or school finding out about the shared photographs and is so upset about the situation he has threatened to commit suicide. Aside from the questions of confidentiality and Sam's own right of self-determination, it is possible he may be at risk of immediate and serious harm. This raises the question of whether parental consent for intervention is necessary, as well as questions around the extent to which Sam's age and level of capacity to understand the situation should be taken into consideration. Moreover, in both cases the reporting professionals have not discussed the referrals with the individuals concerned. In England, statutory guidance advises that professionals should "[s]hare with informed consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information" (HM Government, 2018a, p. 4). There is therefore an expectation, in the spirit of openness and transparency, that referrals should be discussed with individuals wherever possible and safe to do so. This creates a potential problem for social workers who receive information from referrers without the individuals' consent; it could generate a more emotional reaction from the parent or child concerned when contact is made, and could affect their working relationship with the social worker and/or lead to a wider breakdown in trust in child welfare or other universal services.

I incorporated the above scenarios into the vignettes because the principles of respect for human rights, self-determination and confidentiality are each included in the International Federation of Social Workers' *Statement of Ethical Principles*, upon which the respective ethical codes for social workers in England and Finland are based (British Association of Social Workers, 2014; Health and Care Professions Council, 2016; Talentia, 2017). As such, I was confident that the

English and Finnish participants would have some awareness of the relevant ethical debates from their social work training and professional registration; this again would help to increase the comparability of the data when analysing the extent and nature of the participants' ethical engagement.

Interviews

The deep, interactional nature of interviews means that they are well suited to research guided by interpretivist perspectives (Gubrium, 2012). The level of detail included in participants' choice of language, subject matter and intonation provides a large quantity of data that is useful for exploring individuals' unique constructions of reality. In addition, the 'back and forth' manner of the interview interaction between the participant and researcher is helpful for clarifying meaning, and I considered that this was especially important for my study since translation would be necessary during half of the interviews. While other methods such as ethnography also correlate with the interpretivist theoretical perspective, I judged that this approach would be less appropriate than interviews as there would be fewer opportunities to clarify meaning in a busy social work office.

Additionally, as I was concerned social workers' individual perspectives, the private nature of one-to-one interviews would provide a safer and more confidential environment for my participants to share their personal views and opinions, in comparison to approaches such as focus groups or group interviews.

The first stage of each interview was structured around the two case vignettes, while in the second stage participants were asked open questions about their practice and work environment (see Appendix 11). This stage of the interview included questions about how referrals were dealt with in each

participant's organisation; the support services available to children and families in their area; whether they considered that children's social work had changed during their career; the ethical issues experienced by social workers in their country; and how they personally manage these ethical issues. I purposefully included questions about referral procedures and service availability to develop a broader picture of the child protection context across the two samples. This is because the problem of having insufficient time to assess cases has been highlighted as a cause of ethical stress and pressure for both English and Finnish social workers in previous research (Broadhurst et al., 2010; Mänttari-van der Kuip, 2016). I also asked about changes in social work to gain an insight into how services had evolved over time, both to help my participants reflect on their work and career, and to obtain greater a historical understanding of their contextual environment. Finally, I included questions about ethical issues and how participants handled them to explore how my participants conceptualised and managed the ethical complexities of their work. Where appropriate, I asked additional, unprepared questions to clarify meaning or when a participant mentioned something novel, interesting or particularly relevant to the research aims.

4.4.4 Interview procedure

The following section describes the entirety of the interview process, from participant recruitment to debriefing and the dissemination of research findings to participants. It is intended to provide a 'thick description' of what occurred, to enable the reader to make an assessment of the validity of the data collection process (Lincoln & Guba, 1985, p. 125).

Pilot study

After obtaining initial ethical approval for the study in March 2016 (see section 4.6 below, and Appendix 2), a pilot study was conducted between May and June 2016, the purpose of which was to determine if the data collection materials were clear and produced suitable interview data. The pilot study involved spending one week in Eastern Finland where I conducted four interviews, two of which were face-to-face and two were conducted by telephone, with translation support provided in all cases. In England, I visited a local authority in the Midlands where I conducted two face-to-face interviews. The English participants were recruited through a senior professional contact who disseminated interview invitations to team managers and social workers in their local authority. The Finnish participants were recruited opportunistically through a respected academic and research colleague at the University of Eastern Finland, who acted as a gatekeeper and circulated the invitation to personal contacts.

Overall, the pilot interviews were largely successful, although the challenge of carrying out translations over the telephone in Finland, and the increased potential for misunderstanding associated with this, influenced my decision to conduct all of my ‘main study’ interviews face-to-face. As a result of the pilot study I determined that the constructed vignettes were appropriate and understandable for both English and Finnish audiences, as all participants were able to engage with the scenarios and understood my interview questions. I did however choose to make some small amendments to the final questionnaire and interview guide (see Appendices 9 and 11) in order to reduce the ambiguity of some questions and to obtain additional data on local support service availability.

Recruitment

After the final amendments to the data collection documentation were accepted by Keele University's Ethical Review Panel in July 2016 (see Appendix 2), I approached 14 English local authority contacts within a local teaching partnership by email, including principal social workers and senior managers, and invited social workers from each organisation to participate in the study. Five local authorities responded to the request and information relating to the study (including a study abstract, information sheet and consent forms; see Appendices 4, 6, 7 and 8), was disseminated to social workers in each authority, who were then asked to independently 'opt in' and contact me to arrange their interview. In one local authority, a senior staff member helped to arrange a schedule for the interviews over two days to fit around staff training. While this was intended as a helpful gesture, it did result in the senior staff member being aware of the identities of the social workers who took part from that local authority, and so raised ethical questions around the confidentiality of the interviews, as discussed further in section 4.6. All but two of the English interviews took place at the participants' place of work, which helped to recreate a realistic environment for responding to the hypothetical case referrals. The remaining two interviews took place in my office at Keele University at the request of the participants themselves.

During my research visit to Finland between August and December 2016, my contact and research colleague at the University of Eastern Finland acted as a gatekeeper and approached senior managers in local municipalities on my behalf. Study information was translated into Finnish and sent to the managers by email

(Appendices 3 and 4). Four municipalities responded to the request. As in England, managers disseminated the study information to social workers within their municipalities. In one municipality, the process of organising the interviews was assisted by the fact that all social workers who were not on duty were office-based on one day per week, in order to complete case paperwork. Interviews were therefore arranged to coincide with this weekly office process for convenience. In another municipality, a manager arranged a schedule of interviews over two days when social workers were present at the office due to an organisational audit. As above, this was intended as a helpful gesture for both me and my participants; however, the fact that some social workers were seen by colleagues coming in and out of the interview room raised similar ethical issues around the confidentiality of the interviews, as discussed further in section 4.6.

During the interview

Prior to each interview I gave a verbal overview of the study to participants and provided them with a second copy of the study information sheet and consent forms. I checked that each participant had read and understood the documents and invited them to ask questions if anything was unclear, before they signed the consent forms. This helped to act as an ice-breaker, and at this stage in many of the interviews I chatted to participants about a variety of topics, including my time visiting Finland. During this introduction, I also made clear that each participant may withdraw their consent to take part in the study without giving a reason, at any time up to submission of the thesis, with no repercussions. All of the interviews were audio-recorded and translation support was provided by a Finnish research colleague in all but one of the Finnish interviews, at the participant's own

request. While this potentially could have increased the likelihood for misunderstanding during this interview, it became clear that the participant had an excellent command of English and so I was confident in the quality of the data and its comparability with the other interviews.

In the first stage of the interview, I asked each participant to read and complete the printed questionnaire by hand. During this stage, a number of the participants spoke to me about their previous experience in child protection work, which helped to guide some of the conversation later in the interview. Following this, I asked participants to read the first case vignette and invited them to make notes on the paper if they wished. I then asked each participant about the issues in the case, how serious the issues appeared at first glance, and how they might respond if allocated the case in practice. This process was then repeated for the second case vignette. In the final stage of the interview, I asked participants the additional questions listed in the interview guide (see Appendix 11), as well as further unprepared questions to clarify meaning where necessary. For example, when one Finnish participant described ‘supervision’, I asked whether this was a form of group supervision provided by an independent social worker (a practice I had read and learned about prior to the interviews), which the participant confirmed.

At the end of the interview process, I thanked each participant for their time and conducted the interview debrief, during which I explained in more detail the purpose of the study and my interest in child protection decision-making and ethical engagement in different national contexts. I also offered information about myself, including information about my personal educational and professional background. My intention here was to try to reduce the inherent power imbalances

associated with the researcher-participant relationship. Following this debrief, I also asked each participant if they had questions for me. The most common question at this stage was about the main differences between child protection in England and Finland I had encountered during my research. Finally, I confirmed arrangements for disseminating a summary of the study findings and invited participants to contact me if they had further questions following the interview.

Use of translation

Study documentation was translated through the support of a research colleague at the University of Eastern Finland. My colleague, a Finnish national, is a respected academic in the field of child welfare social work and regularly publishes in English. As such, I was confident in the accuracy and quality of the translations (see Appendices 3-10). During each of the Finnish interviews, this colleague or another Finnish child welfare academic offered real-time verbal translation support to all Finnish participants. As discussed, all but one Finnish participant accepted this support and this interview took place entirely in English, with no translator present. However, the fact that a translator was present in the remaining 14 Finnish interviews inevitably affected the interview dynamic to some extent. Despite this, the translation support in fact helped to put many participants at ease and facilitated informal conversation before and after the interviews. As such, the interviews were conducted in a friendly atmosphere and it became clear that most of the participants had a good understanding of English, even if they did not feel confident responding to my questions in English directly. For example, many of the Finnish participants would nod or use other non-verbal cues when their response was being translated back to me in English. On other occasions,

participants responded immediately to my questions in English, without needing the question translated for them. Similarly, participants would sometimes interject to correct a translation or to clarify their meaning, which helped to reassure me that the final translations were as accurate as possible.

4.4.5 Data analysis

All English speech in the interview audio recordings was transcribed verbatim using the software *Express Scribe*, to assist and accelerate the transcription process. I chose to complete the transcription myself instead of using the services of a transcriptionist, as I judged that the process of listening back to the interviews would help me to remember the interaction and any relevant details; for example, if a participant appeared visibly emotional when responding to a question. I matched this transcribed information with notes I had made immediately after each interview, which allowed me to make an initial record of my observations. After completing the transcripts I then used the qualitative data analysis software *NVivo* to facilitate my analysis. Overall, I used a mixed analysis approach which borrowed elements of constructivist grounded theory (Charmaz, 2014) and cross-sectional and non-cross-sectional qualitative analysis techniques (Mason, 2002), alongside a method for analysing ethical engagement based on the IFSW/IASSW 2012 *Statement of Ethical Principles*, and a tool for comparing references to local support services across the two national samples.

Grounded theory

In line with my interpretivist perspective, my overall analysis was guided by Kathy Charmaz's (2014) constructivist grounded theory approach. Grounded theory has been an influential method of qualitative analysis since its development in the late 1960s (Glaser & Strauss, 1967), and offers a structured technique for inductively drawing out themes from data to generate theory. Various adaptations have been made to the original grounded theory approach, which has been criticised by some for its inflexibility and overly positivistic methods (Grbich, 2012). For example, Grbich (2012, pp. 81-82) has suggested that the original Glaserian approach "rejects the constructivist orientation [and instead sees] your role as researcher [as] one where there is minimal intrusion of your own predilections as you go about the constant comparative process". Gribich (2012, p. 87) has similarly argued that Strauss and Corbin's adaptation of grounded theory (Strauss & Corbin, 1990) focuses on the idea of a "quasi-objective centred researcher".

From my own perspective, distance and objectivity are inherently difficult to achieve in an interview context as the nature of the interpersonal interaction shapes both the participants' responses and the researcher's interpretation of the data. For this reason, I judged that Charmaz's (2014, p. 17) constructivist approach was more relevant to my own theoretical perspective, as she sees "[r]esearch participants' implicit meanings, experiential views – and researchers' finished grounded theories – [as] constructions of reality". Throughout the process of undertaking the research, therefore, my approach to data collection and analysis followed key stages of the constructivist grounded theory method (Charmaz, 2014, p. 18).

First, after appraising relevant literature I formulated my four research aims, discussed in section 4.2, which then informed my participant recruitment and data collection strategy, in line with the ‘intensive interviewing’ format described by Charmaz (2014, p. 56). Specifically, I selected participants who had first-hand experience of relevance to my research topic; I used open-ended questions to obtain detailed responses; I sought to explore my participants’ individual perspectives; and I followed up on any unanticipated discussion topics to encourage new areas of inquiry.

Second, upon transcribing each interview, transferring the transcript to *NVivo* and supplementing the transcript with annotated notes taken following the interview, I began the process of initial coding. A particular feature of the constructivist grounded theory approach is the need to “stick closely to the data” (Charmaz, 2014, p. 116), and so I began the initial coding phase by reviewing each interview transcript line by line, and adding provisional codes based on each participants’ interview discussion. These initial codes resembled short statements which helped me to categorise distinct sections of text. For example, when coding one interview with an English participant, I noted numerous descriptions of organisational processes and systems, such as statements about checking IT systems for family records and processes around locating records from other agencies. I also noted that, when I asked the same participant about the services available to children and families in their local area, they largely described processes for escalating concerns and “going to conference”. My initial code for this participant’s account therefore stated: “Description of the CP [child protection] procedure”. After comparing this response with other participants’ answers to this question, the attribution of this code to similar statements

eventually enabled me to identify a tendency among some of the English participants to focus on procedural matters during their discussion, rather than describing the actual services available to families in their area (a tendency which differed from the Finnish participants' accounts). I captured my thoughts about this difference by writing additional memos, or short analytic notes, which according to Charmaz (2014, p. 162) help to "capture your thoughts, capture the comparisons and connections you make, and crystalize questions and directions for you to pursue". Specifically, my memos on this subject contained comments about how the Finnish responses to the question about support services seemed to be more standardised, while the English responses were more varied, though procedurally focused, and participants often did not seem to answer the question directly.

After conducting this initial phase of coding, I then re-read the transcripts available to me (since the analysis and data collection occurred concurrently), and began to develop more focused codes; codes which highlighted significant or recurrent topics or ideas noted during the initial coding phase. According to Charmaz (2014, p. 138), this phase of focused coding involves "concentrat[ing] on what we define as the most useful initial codes and then [testing] them against extensive data". During this phase of the analysis I therefore chose to concentrate my investigation on certain topics and themes over others. For instance, the procedural focus I had identified among many of the English participants' accounts, described above, appeared significant to me and accorded with much of the literature I had read on English social work, which according to some authors has become increasingly procedurally driven and managerialised in recent years (Clark, 1992; Rogowski, 2012). During my initial analysis I had also noted some

similar procedures for responding to referrals described by both the Finnish and English participants. Combined with my growing memos on this topic, this interpretation of the data eventually inspired my decision to explore *procedure* as one of my core themes (discussed further in chapter seven). In contrast, one initial code I chose not to concentrate on further concerned the topic of ‘privatisation of services’. This topic was mentioned during one Finnish interview, when the participant described her concerns about the impact of increasingly privatised family support services in her municipality. Although this aspect of the discussion was interesting to me, because this issue was not discussed by any other Finnish participants (including participants within the same municipality), or English participants, I judged that this code, when tested against the other data, should not form a core focus of my later analysis. This was why the issue of service privatisation – although a topical matter that could warrant further research - did not develop into one of my core thematic areas of investigation.

Another important phase of constructivist grounded theory analysis, which occurs alongside both the initial coding and more focused coding stages, is the process of ‘theoretical sampling’. According to Charmaz (2014, p. 199), “[T]heoretical sampling involves starting with data, constructing tentative ideas about the data, and then examining these ideas *through further empirical inquiry*” (emphasis added). In practice, when carrying out the research, both my data collection and analysis occurred alongside one another over the course of approximately one year. Although it was not possible, for practical reasons, for me to continue travelling back and forth from England and Finland to collect additional data, after conducting each interview I began the transcription and coding process while still in the process of completing further interviews. This

allowed me to identify common or interesting topics within earlier interviews and helped me to seek out additional data on these same topics as I continued my data collection. The fact I had conducted my pilot study and some of the main study interviews in England before travelling to Finland, also helped to inform tentative ideas concerning differences and similarities between the two contexts and the participants' responses, which then assisted the process of constant comparison so central to the grounded theory method.

By adopting the above approach, combined with cross-sectional and non-cross-sectional qualitative analysis approaches described by Mason (2002) (discussed further below), I then began the initial process of theorising; that is, developing “theoretical understanding as gained through the theorist’s interpretation of the studied phenomenon” (Charmaz, 2014, p. 230). This approach enabled me to confirm what I considered to be core thematic categories within the data set overall; here I used tentative theoretical explanations to reflect on and explore these core themes, and I then returned to review existing literature to challenge these tentative explanations when further refining my analysis. One example of this includes the core theme of *risk*. This concept and topic appeared throughout the entirety of my data set, and I was able to reflect upon the significance of both the national context and local organisational environment in influencing participants’ sensitivity to, and response to risk factors within their everyday practice. I began to theorise that risk narratives, at all scalar levels, seemed to play an important role in shaping social workers’ approaches to decision-making (ideas also considered by Webb, 2006). Arguably, this then contributed to a prioritisation of risk concerns over other relevant considerations, including ethical considerations. My ideas concerning the theme of *risk* – derived

through the constructivist grounded theory analysis approach - are explored further in chapters seven and eight.

Cross-sectional and non-cross-sectional analysis

As discussed above, alongside the use of constructivist grounded theory methods, I also used the cross-sectional and non-cross-sectional analysis approaches, described by Mason (2002), to help to derive key areas of thematic investigation. Cross-sectional analysis refers to the process of making comparisons across the whole data set (Mason, 2002, p. 150), and this allowed me to compare and examine the most common ideas or topics that emerged over the range of interviews. One example of this, discussed above, concerns the topic of *risk*. A second example relates to the participants' references to the support and guidance they received from other people when carrying out their day-to-day work tasks. The process of coding references to such support allowed me to detect their recurrence and significance over the entire data set, and this influenced my decision to use the concept of *support* as an overriding theme within my thesis discussion (see chapter seven). Alongside this approach, I also utilised the method of non-cross-sectional analysis; this involved focusing on discrete sections of the interview data (Mason, 2002, p. 165), and allowed me to identify relevant topics or concepts that did not feature across the whole data set, but still generated meaning at certain points within the data. For example, references to children's best interests did not feature in participants' responses to every interview question; however, several participants made powerful references to this topic when asked specifically about the ethical issues experienced by social workers in their country. Therefore, though my codes on this topic were less frequent across

the whole data set, when examining my focused codes and memos, I considered that this topic warranted further exploration as a theme in its own right. This influenced my decision to explore *best interests* as a core theme, particularly when discussing participants' understanding and conceptualisation of ethical issues within their work.

Analysis of ethical engagement

In addition to the above approaches, I incorporated a further system of analysis when considering the case vignette data specifically, to explore the extent to which my participants made reference to ethical issues or concepts when responding to the two cases. Although I did not directly ask any of my participants about ethical issues when discussing the vignettes, I wanted to explore the extent to which they independently engaged with ethical issues or concepts when presented with the referral information, without first being prompted. For this purpose, I used the ethical principles outlined in the IFSW/IASSW's 2012 *Statement of Ethical Principles* as a guide when developing my analysis approach. In particular, I coded for phrases or terms which had some broad connection to the core principles of human rights and human dignity, social justice and professional conduct, referred to within the IFSW/IASSW document. Given the content of the vignettes, I anticipated that certain ethical concepts or ideas relating to the above principles may emerge more frequently from the participants' responses; these included references to the self-determination of children and parents, discrimination, and/or references to confidentiality or loss of trust. As regards the specific terms or concepts I coded as ethics-related, as discussed in the analysis by Banks and Williams (2005), social workers may

describe ethically difficult situations using highly varied language and terminology. In practice this means that social workers' 'ethics talk' may range from the use of explicitly ethical language (including terms such as 'rights', 'honesty' or 'fairness'), to language which does not use specialist terminology, but which draws on common moral standards (Banks & Williams, 2005, p. 1010). For this reason I adopted a broad interpretation of ethical ideas and concepts when analysing this section of the interviews. For example, when discussing vignette one, one English participant stated, "I would hope that the referrer, if it had come to me, I would have hoped that the referrer had discussed this a bit more with the family." Here, although the participant did not refer to any ethical concept directly, I coded this as an example of ethical engagement as the participant appeared to be making indirect reference to a potential breach of Kate's confidentiality and right to privacy.

Analysis of service availability

Finally, when analysing the data relating to the second part of the interview, specifically, when participants were asked to describe the services available to children and families in their area, I observed a clear difference in the range of services the Finnish participants discussed compared to the English participants. Prior to the interviews I did not foresee such stark variation across the two samples, however after listening back to the recordings, beginning the coding and using the non-cross-sectional analysis approach described above, I decided that it would be helpful to compare the frequency of references to services, and types of services discussed, in accordance with my third research aim ('to compare data relating to the two national samples'). For this reason, some numerical data

regarding service availability is presented in chapter six. It should be noted that the data is not intended to be viewed as reliable quantitative evidence of service differences; it is merely presented as a means of emphasising differences within the participants' verbal responses to support the qualitative analysis offered. Similarly, in the following section of this chapter, I discuss my participants' demographic profile, their educational background and level of experience based on the questionnaire responses, and some quantitative data is included. Once again, this is only intended to provide an overview of my participants' personal characteristics to inform the qualitative discussion offered in chapters five and six.

4.5 Participant characteristics

4.5.1 Demographic profile

As discussed previously when describing my sampling approach and interview procedure, only qualified social workers were recruited and prior to each interview, participants were asked to complete a short questionnaire to capture information about their personal characteristics (Appendix 9). This was because factors such as professional experience have been identified as influencing social work decision-making in past empirical studies (Drury-Hudson, 1999; McLaughlin et al., 2010).

Gender

The sample consisted of 30 social workers in total with 15 participants from each country. All of the Finnish participants were female while two of the 15 English social workers were male (see Table 2). Statistics for England collated by the

Health and Care Professions Council indicate that out of 93,872 social workers registered in England as of March 2018, 76,957 (82 per cent) were female and 16,914 (18 per cent) were male (Health and Care Professions Council, 2018); this suggests there was a slight underrepresentation of male social workers in the English sample. As regards the Finnish sample, Eurostat figures indicate that Finland has a higher proportion of women working in the health and social work sector than men, compared to other European nations (European Commission, 2013). However, as all of the Finnish participants were female, again there was a similar underrepresentation of male social workers within the Finnish sample. In view of my study's qualitative research design and interest in each participant's unique perspective, it was not my intention to obtain a representative sample and so I did not recruit on the basis of gender. However, as it has been suggested in theoretical debates that gender may play a role in ethical reasoning (Gilligan, 1982), I considered that the gender balance of my sample deserved to be explored, since this could be of relevance when interpreting the interview results.

Age

Table 2 illustrates the age profile of the English and Finnish participants respectively. The English participants' ages ranged from 27 to 52 years, the average being 40 years. The Finnish social workers were marginally older, with ages ranging from 31 to 61 years, the average age being 42 years. This difference could be related to the fact social work training is longer in Finland than in England (Hussein, 2011), which may have resulted in participants entering the profession at a slightly older age.

Table 2: Age and gender profile of participants

	England (N =15)					Finland (N = 15)				
Site	Local authority 1	Local authority 2	Local authority 3	Local authority 4	Total	Municipality 1	Municipality 2	Municipality 3	Total	Overall total (England and Finland)
Number of participants	4	7	3	1	15	4	9	2	15	30
Number of participants (male/female)	2 male/ 2 female	0 male/ 7 female	1 male/ 2 female	0 male/ 1 female	3 male/ 12 female	0 male/ 4 female	0 male/ 9 female	0 male/ 2 female	0 male/ 15 female	3 male/ 27 female
Age (range)	27 to 51 years	29 to 52 years	31 to 47 years	Unknown*	27 to 52 years	31 to 61 years	32 to 59 years	33 years (1 unknown*)	31 to 61 years	27 to 61 years
Age (average)	38 years	43 years	38 years	Unknown*	40 years	47 years	41 years	33 years	42 years	41 years

*Information not provided by the participant.

4.5.2 Social work education and experience

Date social work qualification obtained

The date the participants obtained their social work qualification ranged from between one month and 19 years prior to their interview date across both samples, indicating a considerable variation in levels of post-qualifying experience. In England, participants had obtained their qualification between one month and 12 years prior to their interview date, with the average length of post-qualifying experience being three years and four months. In Finland, participants had obtained their qualification between one month and 19 years prior to their interview, the average being four years and nine months (see Table 3). Though this may suggest that the Finnish participants were relatively more experienced than the English sample, it is not possible to confirm whether all of the participants had been employed as social workers throughout the period after obtaining their qualification; for example, some participants may have worked in roles other than social work, or may have taken time away from employment for other reasons.

Type of qualification

All of the Finnish participants had completed the Master of Social Sciences with a major in social work, the minimum qualification required to practice as a professional social worker in Finland (Vornanen, Törrönen, Lähteinen, & Pohjola, 2007). Although this information was not directly provided by two of the Finnish participants, they would not have been permitted to practice in their role under the Act on Social Welfare Professionals 2015 without having obtained this qualification. The Master of Social Sciences is obtained after three years of study

at Bachelor's level and a further two years at Master's level. Two of the participants had also completed the Bachelor's level qualification *sosionomikoulutus* prior to completing their Master's degree, in order to become a 'social instructor' (Vornanen et al., 2007, p. 119) or *sosionomi*. The *sosionomikoulutus* qualification allows holders to practice as licensed 'social service professionals' (Valvira, n.d.), an occupation which has different roles and responsibilities to that of a qualified social worker, but may be comparable to a family support worker in the English child welfare context.

In England, of the 14 participants who provided their educational information, six participants were educated to Master's level; that is, they had completed a two-year Master's degree course in social work preceded by a three-year Bachelor's level degree in any other subject. Seven of the English participants had obtained a three-year Bachelor's degree in social work only, and one participant had obtained a Postgraduate Diploma in social work as part of a postgraduate 'fast track' training scheme. Due to the different education systems in England and Finland, the Finnish participants had received more years of social work-focused university-based training than the English participants. However, it should be noted that five of the English participants had also completed post-qualifying continuing professional development training, including training in systemic practice, parenting assessments, multi-agency interviewing techniques and practice educator training.

Time with current employer

Staff retention in child welfare social work has been shown to have a positive impact on organisational relations as well as outcomes for children and families

(Curry, McCarragher, & Dellmann-Jenkins, 2005). For this reason, gaining a picture of how long participants had been employed within their local authority or municipality was of relevance for understanding more about how participants' approached their decisions, particularly if organisational factors were found to play a role in this. The figures presented in Table 3 display the participants' time with their current employer as qualified social workers only; the figures do not show periods of employment as unqualified workers (for example, as a family support worker or *sosionomi*). In England, the length of employment ranged from one month to eight years, with the average being two years and seven months. In Finland, participants' time with their current employers ranged from one month to 10 years, with the average length of employment being three years and three months. This suggests there was a slightly higher level of staff retention among the Finnish participants, compared to the English sample. In addition, a small number of participants, particularly in Finland, reported that they had worked for their current employer as an unqualified worker for many years prior to becoming a social worker. For example, one Finnish participant stated that she had been employed by her municipality for 32 years, though she had only one year of experience as a qualified social worker.

Previous relevant experience

Across both samples, thirteen Finnish participants and seven English participants reported that they had previous relevant work experience prior to beginning employment as a social worker with their current employer. For example, four

Table 3: Education and experience profile

	England (N =15)					Finland (N = 15)				
Site	Local authority 1	Local authority 2	Local authority 3	Local authority 4	Total	Municipality 1	Municipality 2	Municipality 3	Total	Overall total (England and Finland)
Number of participants	4	7	3	1	15	4	9	2	15	30
Education level (MA/BA/ PG Dip)	2 MA/ 2 BA	3 MA/ 3 BA/ 1 unknown*	1 MA/ 2 BA	1 PG Dip	6 MA/ 7 BA/ 1 PG Dip/ 1 unknown*	4 MA	7 MA/ 2 unknown*	2 MA	13 MA/ 2 unknown*	19 MA/ 7 BA/ 1 PG Dip/ 1 unknown*
Post-qualifying experience (range)	10 months to 9 years	2 years to 12 years	1 year to 3 years	1 month	1 month to 12 years	2 years to 11 years	1 month to 19 years	3 months to 10 years	1 month to 19 years	1 month to 19 years
Post-qualifying experience (average)	4 years	4 years	2 years	1 month	3 years 4 months	6 years	7 years	5 years	6 years 3 months	4 years 9 months
Time with current employer (range)	7 months to 8 years	3 months to 7 years	1 year to 3 years	1 month	1 month to 8 years	1 year to 8 years	1 month to 7 years	3 months to 10 years	1 month to 10 years	1 month to 10 years
Time with current employer (average)	2 years 10 months	3 years 2 months	1 year 8 months	1 month	2 years 7 months	3 years 3 months	2 years 10 months	5 years 2 months	3 years 3 months	2 years 11 months

*Information not provided by the participant.

Finnish participants and three English participants stated that they had worked as social workers in other municipalities or local authorities, while one Finnish participant had worked as a *sosionomi*, and two English participants as social work assistants. Others within the English sample had worked in roles within family support, child care, residential care, youth work, mental health support work, or as a Family Court Adviser. Similarly, several Finnish participants reported that they had worked in roles within the criminal justice system, as school social workers or supporting refugees. These results highlight the breadth of experience held across both samples, which may have had an impact on the participants' interview responses.

4.5.3 Questionnaire responses summary

The questionnaire responses discussed above reveal that both the English and Finnish samples were predominantly female, of mixed ages, with a wide range of social work-related experience, both in terms of the nature and length of that experience. Though the Finnish participants had more years of university-based social work education, several English participants had also undertaken post-qualifying training, albeit within a workplace rather than a university-based setting. On average, the responses indicate that the Finnish participants were slightly older and had more years of professional experience, both pre and post-qualifying; however almost half of the English participants had also acquired relevant work experience prior to commencing their current role. It has been observed that professional experience and 'practice wisdom' can impact on and shape social work decision-making in various

ways (Drury-Hudson, 1999), and so this information is of relevance when considering the participants' responses to the case vignettes and interview questions, discussed in detail in chapters five and six of the thesis.

4.6 Ethical considerations

Both when preparing to undertake this study and when collecting my data, ethical reflection formed a central part of the research process. These two dimensions of ethics in qualitative research have been described as 'procedural ethics' and 'ethics in practice' (Guillemin & Gillam, 2004), and in the following section of this chapter, I outline how I managed ethical issues at both stages.

Procedural ethics refers to the process of "seeking approval from a relevant ethics committee to undertake research involving humans" (Guillemin & Gillam, 2004, p. 263), and for this study, this involved obtaining ethical approval from Keele University's Ethical Review Panel and where requested, from individual local authorities and municipalities. When drafting my ethics application and planning my study design, I consulted the Economic and Social Research Council's (2015) *Framework for Research Ethics* and considered how each of the principles related to my study. These principles included the need to maximise benefit and reduce harm to participants; the need to obtain voluntary, informed consent; the need to conduct the research in an open and transparent manner, free from coercion; and the need to respect the confidential nature of the information and the personal data collected.

As regards maximising benefit, I was keen for my participants and their agencies to gain some benefit from participating in my study. Within the study information sheet (Appendices 5 and 6) I emphasised that involvement would provide participants with an opportunity to learn more about practice in a different national context; this could help to demonstrate their commitment to learning and continuing professional development, which in the English context is a requirement for continued professional registration (Health and Care Professions Council, 2016). I also stressed that their participation would contribute to a growing body of comparative social work research and could help to inform future practice debates in England, Finland and elsewhere, through the publication of research findings.

When drafting my application I identified that a possible ethical problem could arise when obtaining voluntary, informed consent. This was because, due to my proposed recruitment approach and the need to go through gatekeepers, some participants may be asked to participate by their manager or other senior colleagues, and so could feel pressured to take part as a result. To reduce the potential for this, I chose to recruit participants through an 'opt-in' process, through which managers disseminated invitations to their teams and interested social workers could then contact me independently to arrange their interview.

A further ethical problem then related to the issue of transparency. As I hoped to examine the extent to which my participants referred to ethical issues when discussing the case vignettes, without first being promoted, I chose not to make reference to the subject of social work ethics in the study information sheet. This arguably created a lack of transparency as ethics were in fact a key subject of my

study. When reflecting on this issue I consulted the proposed code of ethics for social work research developed by Ian Butler (2002, p. 246), who suggested that any element of concealment may only be permitted where “no alternative strategy is feasible, where no harm to the research subject can be foreseen and where the greater good is self-evidently served”. As I considered that these criteria applied in my study, particularly as some scholars have raised concerns about the extent of ethical reflection in English child protection debates (Featherstone et al., 2014), in my application for ethical approval from Keele University I justified my lack of reference to ethics by explaining that:

If, prior to the interview, participants are made aware that the research is concerned with ethics, it is possible that their responses may refer to ethical issues more explicitly than would otherwise be the case, therefore impacting the quality of the data produced.

However, in order to increase transparency, when developing my interview guide I chose to include questions about ethics and ethical dilemmas *later* in the interview, to clearly reveal this aspect of the study. Additionally, when drafting the interview debrief, I ensured that I explained my true research interests and emphasised that the purpose of the study was to gain an insight into how practice contexts may shape ethical deliberation and decision-making, and not to assess any individual social worker’s practice.

In order to protect my participants’ confidentiality, I made arrangements to save all personal contact details securely in a password-protected document with interview recordings saved in password-protected folders. In line with the UK’s Data

Protection Act 1998 and Finland's Personal Data Act 1999², the legislation in place when the interviews were conducted, I also offered assurances that all personal data would be destroyed following completion of the research. Moreover, when referring to participants within the thesis and other publications, I opted to use randomly-assigned participant numbers to reduce the likelihood of individuals being identified. Additionally, I considered that recruiting participants from different local authorities/municipalities could again help to reduce the likelihood of individuals being identified by colleagues, while my chosen method of data analysis would further help to protect their identities, as the process of aggregating the interview responses to develop themes would again reduce the focus on individual participant's responses.

As a result of taking the above precautions, ethical approval for the study was granted by Keele University's Ethical Review Panel in March 2016. Amended interview documentation was then accepted in July 2016 (see Appendix 2) after small adjustments were made to the questionnaire, interview guide and information sheet following the pilot study, in order to increase clarity. Additionally, one local authority in England and two municipalities in Finland requested that I meet their agency-specific ethical approval processes. No changes to the study design needed to be made at this stage; however I was required to provide further clarification on how my participants' data would be managed and protected and offered further assurances surrounding confidentiality.

² During the process of completing this thesis, the relevant legislation concerning data protection in both the UK and Finland was updated to comply with the provisions of the European General Data Protection Regulation (GDPR) 2016/679. To confirm that my data processing continued to uphold the standards of this new regulation, I consulted guidance concerning the GDPR published by the Information Commissioner's Office (2018).

When beginning the process of data collection it was vital that I considered the matter of ‘ethics in practice’; that is, the “day-to-day ethical issues that arise in the doing of research” (Guillemin & Gillam, 2004, p. 264). As discussed when describing the interview procedure in section 4.4.4, particular issues arose relating to voluntary participation and respecting confidentiality, as in one local authority and one municipality, senior staff members created interview timetables in an effort to streamline the interview process for both myself and the participating social workers. While this was intended as a helpful gesture in both cases, in practice, it meant that the participants did not personally contact me to express their interest in participating beforehand, which cast doubt on how ‘voluntary’ their participation was. It also meant that a senior staff member in each organisation, and potentially team colleagues, were aware of who had participated in the study, which increased the likelihood of responses being linked to individual participants. Therefore, in order to confirm that my participants were taking part voluntarily and were fully informed about the research, at the start of each interview I verbally checked that each participant had read the information sheet and consented to take part, and provided additional copies of the documentation for them to take away. I also outlined how participants could withdraw from the study if they wished, with no repercussions. During these preliminary discussions I was reassured that the participants had a genuine interest in the research, as I received many insightful questions about the study. This again demonstrated that the participants were choosing to take part through their own free will and not simply because their manager had asked them to. As regards the issue of confidentiality, to protect my participants’ identities I took careful steps to anonymise all interview data within my thesis and associated research

papers through the use of randomly assigned participant and organisation numbers, as discussed above. I also removed any data that might reveal a particular location (for example, if a participant referred to a specific local support service), and carefully selected my quotations to reduce the likelihood of particular local authorities or municipalities being identified, which would in turn help to protect the identities of individual participants within these agencies.

Finally, in addition to the above matters concerning procedural ethics and ‘ethics in practice’, when conducting my analysis and writing up my study results, ethics continued to be relevant as I analysed and depicted my participants’ responses within their organisational and national environments. As discussed in section 4.3, ethical issues may arise when conducting comparative research related to the process of examining, interpreting and representing ‘other’, less familiar contexts. In an effort to reduce the impact of this, I strived to integrate reflection and reflexivity into my analysis wherever possible by challenging how and why I interpreted the data as I did. For example, when exploring my participants’ responses to the case vignettes, I considered a number of explanations for why some participants judged that the first case vignette may not warrant statutory intervention, or why others did not discuss any ethical issues within the two scenarios. This reflective practice helped to uphold the ethical integrity of my analysis, as I sought to avoid misrepresenting my participants and their practice contexts. The reflection also helped to maintain academic rigour, as I considered a broad range of explanations for my observations to avoid drawing conclusions I could not support.

4.7 Reflections

The process of collecting data for this comparative study was inspiring, insightful and highly enjoyable. Prior to beginning the data collection I was conscious of potential problems that could result from my lack of fluency in Finnish, and language issues did indeed prove to be one of the most significant challenges I faced.

As discussed in section 4.3, some English and Finnish terms are inherently difficult to translate, which increases the likelihood of misunderstanding for both participants and the researcher when undertaking a project of this nature. Connected to this issue, a particular problem I encountered related to my inclusion of the term ‘educational welfare officer’ in the first case vignette. When conducting interviews for the main study, some Finnish participants asked questions about the role of these professionals in England, and whether they had any involvement in child protection assessments (this was because the term translated into Finnish as *koulun sosiaalityöntekijältä*, or ‘school social worker’). In practice, this did not invalidate the results as school social workers in Finland have similar roles to educational welfare officers, and do not undertake child protection assessments themselves. Therefore, following my verbal explanation, the vignette was still understandable for the Finnish participants. Unfortunately, this specific issue only became apparent during the main study, and not during the earlier pilot study, meaning it was difficult to amend the research materials at this stage. A further example of this occurred when a number of Finnish participants referred to ‘supervision’ during their interviews. When I sought clarification, I determined that the participants were discussing a form of external supervision provided to their team by an independent professional, and not to the one-

to-one form of supervision provided by managers, as is common in England. Had I not sought this clarification, this distinction may not have come to light. Both of these examples highlight some of the difficulties related to language and translation I experienced during the data collection phase and exemplify the wider challenges of conducting cross-language comparative research, as discussed by May and Perry (2011).

A separate problem I encountered, referred to in section 4.4.1, related to my difficulties in recruiting English social workers. As discussed previously, it took more than twice the length of time to arrange and complete the English interviews compared to the Finnish interviews, and I reflected that this in itself may reveal differences between the two child protection contexts. For example, it is possible that the English social workers I approached may have had higher workloads than their Finnish counterparts, meaning they had less time to devote to activities such as participation in research. However, as past studies have identified, Finnish social workers also have high caseloads and can experience significant time pressures, akin to those experienced by English social workers (Berrick et al., 2016b; Blomberg et al., 2010). Another explanation for the recruitment challenges may be related to the structure of the Finnish social work teams, and the fact that the Finnish practitioners appeared to work more closely together; for example, when completing office-based administration tasks or participating in group supervision. This could help to explain why I was conveniently able to arrange many of my Finnish interviews over the same dates. Alternatively, the difference could be related to the recruitment process itself, and the fact that my Finnish research colleague, a respected Professor, acted as a

gatekeeper for my Finnish interviews. By contrast, in England I approached local authority contacts directly as a doctoral student. As discussed by Charmaz (2014, p. 61), “how your status as a researcher appears to... prospective research participants affects your effectiveness in finding suitable people and conducting the interviews”; therefore, the difference in status between my gatekeeper and I could help to explain the dissimilar response rates in England and Finland.

In spite of the above challenges, on balance I believe I was able to obtain valid and comparable research data upon which to base my analysis. I also believe that my methodological choices were in keeping with my research aims and theoretical perspective, and respected the rights and well-being of the individuals who participated in the study, in line with accepted principles for research ethics. In the following chapters I present the results of the data collection and analysis, and go on to discuss key findings that have emerged from the data, both inductively and in respect of my specific research aims.

Chapter Five

Findings: Vignette Responses

5.1 Introduction

As discussed in the previous chapter, data for this study was obtained in three stages. First, participants were asked to complete a short questionnaire, the results of which were presented in chapter four. Second, participants were asked to respond to two constructed case vignettes and third, participants were asked a series of semi-structured interview questions. This chapter presents the results of part two of the data collection process: the participants' responses to the case vignettes. Specifically this chapter provides a description of apparent trends, commonalities and differences within the participants' responses.

5.2 Vignette data

The following sections of this chapter present the participants' responses to the two constructed case vignettes. Where quotations have been used, they have been chosen as typical examples of participants' views or opinions, or as examples of views found to be uncharacteristic of the samples from each country.

Both differences and similarities were observed within the data across the two national samples. While similar child welfare issues were identified in the case vignettes by both the English and Finnish participants, differences emerged relating to the specific types of risk factors identified, particularly in the responses to vignette

two. Across both samples, a key finding was that participants tended to focus on the risk factors within two the cases, with less discussion around ethical issues. When ethical issues were discussed, variation was observed in the depth and level of reflection within individual participants' narratives, with no apparent organisational or national trend.

5.3 Vignette one responses

For ease of reference, the first vignette the participants were asked to read is presented again below:

Vignette One

You receive a telephone call from Anna, an educational welfare officer in a local school. Anna informs you that she is concerned about one of the school's pupils, six-year-old Daniel, who recently told his teacher that he was tired because his mother, Kate, and her partner were arguing at night.

Daniel has been at the school for three months and Anna has met Daniel's mother Kate on four occasions. Kate approached Anna shortly after Daniel started at the school to ask if she could receive financial support from the school to buy furniture. The family receive welfare benefits and live in social housing. On another occasion, Kate appeared upset and told Anna that she previously had two children taken into care, although she was unwilling to say any more about this. The family do not have any relatives in the area.

Daniel has a sister, Emily, aged 18 months. Anna says that she has seen Emily three times (Anna does not know who was looking after Emily on one occasion). Emily is very quiet

and small for her age. Emily does not attend day care. Anna spoke to Kate about putting a support plan in place at the school, however Kate refused this. Kate said she did not want help with caring for the children, she only wanted financial assistance. Anna has concerns about Daniel and Emily but has not told Kate that she has contacted social services. Anna feels that Kate and the children need support but she is worried that Kate may not accept any help.

5.3.1 Identified issues or concerns

There was broad consistency in the types of child welfare issues identified by participants both within and across the English and Finnish samples. Participants from both nations identified a range of issues including: the presence of suspected domestic abuse or violence; the fact the mother, Kate, had had previous children removed; financial pressures; possible developmental delay in the youngest child; the family's isolation; and apparent non-engagement from Kate. Similarities in the participants' responses are illustrated in the below quotes:

You've got the arguing between mum and the partner, that the child has been exposed to and hearing. Financially struggling, mum's isolated, doesn't have any support, family network. She's got previous children in care, that's a concern. Mum's emotionally presenting as not really managing very well. There are concerns about the growth and development of the 18-month-old baby also...

English participant 12, local authority 3 (1 years' experience)³

³ Post-qualifying experience

[T]here is this background that there have been children taken into care before, and placed in out of home care perhaps. And then there is this worry, might there be violence in the family? And then there is this worry about the children, the youngest is one and a half years old, and is so small that she needs good care... And then there is the question, what is the level of basic care in the family, and what is the relationship between the spouses in the family?

Finnish participant 14, municipality 3 (10 years' experience)

The fact that participants from both samples identified broadly similar concerns possibly reveals parallels in the types of issues social workers are required to respond to in the two nations. Some differences were identified, however, which may be related to wider differences in social services provision within the English and Finnish contexts. For example, when discussing how they would respond to the case, a small number of participants from Finland commented on the need to make contact with Kate's 'adult social worker', or discussed exploring the need for an adult social worker due to Kate's apparent financial problems. For example, one participant commented:

About money things, maybe I would find out from the mother whether it is necessary for a mother's social worker, because of this money issue.

Finnish participant 10, municipality 2 (4 years' experience)

In contrast, no English participants referred to involving an adult social worker or other support worker for this purpose, likely because in the English context, individuals would not usually receive support from adult social services due to

financial problems alone. Further differences were also identified related to the level of emphasis placed on certain concerns, in particular, surrounding the matter of Kate's previous children being removed from her care. For example, a number of participants from both nations referred to this as a key concern; however, others reflected on how children being removed may not be especially relevant if the family situation had now changed. This variation was found across both the English and Finnish samples:

I think the main issue at the moment is that we don't have much history. They are mentioning that mum has had previous children removed, so that would be a red flag for me immediately.

English participant 10, local authority 3 (3 years' experience)

[T]here are two children who have already been taken into custody, so there has to be big problems in the family for one reason or another.

Finnish participant 9, municipality 2 (1 months' experience)

Two children previously taken into care, I'd want to be exploring that... but that could have actually been 10 or 15 years ago, and there's a different partner, very different circumstances, so I wouldn't immediately assume this is a terrible situation.

English participant 8, local authority 2 (6 years' experience)

[T]here are two children who have been taken into care previously, so I would ask the mother who has been the worker, and if it appears that the worker is one of our

workers, I might briefly ask, not too much, because it might be a different situation if it's a long time ago...

Finnish participant 13, municipality 2 (6 years' experience)

Significantly, while all of the English participants mentioned in some way the fact that Kate's previous children had been removed, a third of the Finnish participants did not discuss this issue at all. Potentially this difference could signify that the English participants were more concerned about the issue and saw the previous removals as a more significant risk factor. To some extent this finding could indicate that the English participants were relatively more risk-focused, as has been argued in previous research (Wilkins, 2015). However, the difference between the English and Finnish participants' responses may also be connected to the two nations' contrasting systems for child removal, and the fact that in England, a greater number of children are removed without parental consent (Berrick et al., 2015). This may indicate that in the case scenario, Kate could have been less willing to work with social workers in the English context, hence why the issue was interpreted as a greater sign of risk by many of the English participants.

5.3.2 Threshold for intervention

The below discussion focuses on whether or not the participants thought the scenario presented in vignette one would meet the threshold for intervention in their own team; that is, whether the case appeared to be serious enough to warrant an assessment or provision of service from social workers tasked with conducting

statutory interventions under the Children Act 1989 in England, and Child Welfare Act 2007 in Finland.

In all of the interviews participants stated that they would need further information to make a fully informed judgement on the case. This response reveals that participants across both samples recognised the importance of having sufficient factual information in order to make a decision on how to proceed, and this may be seen as evidence of the participants applying analytic, rather than intuitive reasoning when forming their decisions. As regards whether the case appeared to meet the threshold for intervention, seven English participants and five Finnish participants commented that, on the basis of the information available, it seemed unlikely the case would meet the threshold for an assessment within their child protection-focused team. Instead, some participants stated it was more likely the case would be dealt with in the early help or preventative/social welfare arena. This view was held by participants from different local authorities and municipalities, suggesting that this initial risk assessment was not related to any specific organisational threshold:

I'm not so sure if it would initially come through as a referral, probably not.

English participant 9, local authority 1 (2 years' experience)

In terms of the threshold, I'd say it's very low, it's definitely in the early help arena.

English participant 12, local authority 3 (1 years' experience)

[T]his is not one of the most serious cases, kind of, somehow quite basic.

Finnish participant 3, municipality 1 (2 years' experience)

[I'm] not very sure if this came up in [municipality 2] would this come to a child welfare issue or would this come to early support services?

Finnish participant 6, municipality 2 (1 years' experience)

The fact that at least a third of participants from both samples questioned whether the case would reach their team could indicate that thresholds for statutory intervention, at the child protection level at least, are similar in both the English and Finnish contexts. However, it is unclear from the responses whether Kate and her children would actually receive any support if referred to early help/preventative services in either of the two nations. Additionally, the fact that participants from both countries questioned whether the case would reach their team potentially highlights a problem with the vignette scenario itself. Although I deliberately designed the case to be ambiguous as regards the level of risk, and though one English participant stated “quite often we do get this [scenario]” when discussing the vignette, it is still possible that such cases may ordinarily be filtered out by screening teams in both nations. This could explain why so many participants across the two samples did not feel the case would meet the threshold for intervention in their team. This particular issue, and questions about the suitability of the vignette and the vignette method more widely, are discussed further in chapters seven and eight.

5.3.3 First steps in responding to the referral/notification

When the participants were asked what their first steps would be if allocated this case in practice, participants from both England and Finland stated that Anna, the educational welfare officer, should be asked to go back to Kate to inform her that a referral had been made. Participants explained that this was the right thing to do in the spirit of openness and transparency, but was also something that would help to improve their working relationship with Kate, as their intervention would not be unexpected. In addition, participants spoke about the need to obtain consent from Kate before they could begin working with her or seeking information from other agencies. Obtaining consent for intervention was mentioned more frequently among the English participants and tended to be discussed in the language of procedural formality. In Finland, by contrast, obtaining consent was mentioned less frequently, but when mentioned was discussed more within the context of building a trusting relationship with Kate. These differences are highlighted in the below quotes:

My first step would be to gain some consent from mum to go out there... If mum's not willing to give consent or we're struggling to get in contact with mum, then we would look at overriding consent and speaking with the health visitor, to see if they've had much contact with the family as well.

English participant 10, local authority 3 (4 years' experience)

I would be in contact with the mother, before I reach out to any other officials, because I would not like to go behind the mother's back before I would have had the opportunity to tell her that I'm worried.

Finnish participant 9, municipality 2 (1 months' experience)

Many participants also commented on agency processes for dealing with new referrals ‘at the front door’, including having the case provisionally assessed by an initial reception team. Once allocated for assessment, participants from both samples explained that they would approach the case in similar ways, for example, by meeting with Kate; meeting with the children separately to ascertain their views; meeting with the partner if deemed appropriate; and collecting information from other professionals. As regards how the meetings would be approached, a minority of participants from both samples contemplated how they would handle Kate’s apparent resistance to support. For example, participants reflected on the fact Kate had had children removed previously, and suggested that this could explain her apparent unwillingness to accept help and work with professionals, as highlighted in the below quotes:

Us getting involved isn’t necessarily going to make her engage because her children were removed before, she’s automatically going to be quite frightened of any referral...

English participant 5, local authority 2 (12 years’ experience)

[I]s she afraid that these two children are also going to be taken into custody? So if she wants help, is she afraid of the same process starting all over again and she’s going to lose these children also? So there are certainly valid concerns with the mother, but I feel I would have to approach the mother and start finding out what kind of help they need.

Finnish participant 9, municipality 2 (1 months’ experience)

In contrast to the above responses, other participants focused less on Kate's perspective and more on assessing the risk of harm to Daniel and Emily; in many ways resembling the investigative practice approaches characteristic of child protection-orientated child welfare systems (Gilbert, 1997). Significantly, this approach was noted more often among the English participants. For instance, a third of the English participants discussed whether they would make an unannounced visit to Kate due to the nature of the reported concerns. In contrast, all of the Finnish participants stated that they would first make contact with Kate to arrange a meeting:

I'd begin by probably completing an unannounced visit, after speaking with my manager. I'd come up with a bit of a plan with my manager, because there may be some domestic [abuse] and there's a male in the property.

English participant 9, local authority 1 (2 years' experience)

So the first steps would be to check whether these are already clients in child welfare or not. Then contact the parents, perhaps call the mother, and inviting the mother to visit the office, or a home visit could be possible also.

Finnish participant 14, municipality 3 (10 years' experience)

Arguably, the above differences could be seen as evidence in support of claims made previously, that England's system and approach to child protection is more adversarial and child protection-orientated, while Finland's system is more family service-orientated and more strongly based around partnership with families (Gilbert, 1997).

5.3.4 Ethical engagement

As discussed above, differences were identified in the nature and extent of reflection within the participants' responses, both across agencies and across the two national samples. When analysing the data in respect of ethical engagement, I noted that participants who were more reflective tended to make reference to a greater number of ethical issues and concepts when discussing the vignette scenario. Overall, the ethical issues identified by participants correlated with the three broad principles of human rights, social justice and professional conduct referred to in the International Federation of Social Workers' 2012 *Statement of Ethical Issues*. The issues participants' spoke about included the fact that Anna, the educational welfare officer, had reported her concerns to social services without first informing Kate; the need to act in a fair and non-discriminatory way and not make assumptions about Kate's parenting due to her past; and the need to allow Kate the opportunity to work with social services willingly, and not feel coerced. In all cases, these issues were referred to without the use of explicitly ethical language.

The most common issue discussed overall was the possible breach of Kate's privacy and confidentiality by Anna. This was mentioned by eight participants' in total; six from England and two from Finland. Examples of how participants referred to this issue are presented below:

Straight away it's concerning that they've not spoken openly and honestly about whether they want to contact children's social care, that's a real big issue that the EWO [educational welfare officer] needs to discuss, because quite often they don't,

and we will go out and we turn up unannounced and that can lead to not building a really good relationship from the word go.

English participant 4, local authority 2 (2 years' experience)

Well this school social worker, she hasn't told the mother that she's going to call this child welfare social worker. So I would tell this school social worker that she has to call to mother, and tell her that she has called to me. And after that, I would maybe say that we could meet this family together, and start from that.

Finnish participant 11, municipality 2 (4 years' experience)

The second most common ethical issue referred to was the matter of Kate's right to self-determination, in all cases mentioned indirectly and using non-specialist ethical language, but language which inferred the need to engage Kate and allow her the opportunity to work willingly with children's social care and/or other services. This issue was mentioned in six of the interviews in total; four interviews from England and two from Finland:

My first step would be to gain some consent from mum to go out there. That's something that school have said, they're worried that she won't accept any help, but I think that conversation would need to be had with her [Kate], and whether she's accepting of any of that help.

English participant 10, local authority 3 (3 years' experience)

[T]his doesn't have to be a very bad situation... Maybe because there is some resistance and this mother is not very ready to take this help, would it be easier if, maybe the mother would take the help from early support services more easily?

Finnish participant 8, municipality 2 (10 years' experience)

Finally, the third most common issue referred to was the importance of not discriminating against Kate or making assumptions about her parenting because of her history and the fact she had previous children removed. This was mentioned by five participants; two participants from England and three participants from Finland.

Comments included:

She has had two children taken into care so you do have to look into a pattern of behaviours, and to the local authority to find out why these children were taken into care, if they have different fathers, what was their age, was it the same male that they were with?... Because otherwise, if you're saying that people can't change, there's no point in doing any assessment really. You might as well just say we'll just remove.

English participant 5, local authority 2 (12 years' experience)

[I]t is not clear from this notification, is the situation the same than when it was then, when the previous children were taken into care? So it would be necessary to estimate, are the reasons the same now in the family, or is this some previous case and the situation in the family has now changed?

Finnish participant 5, municipality 2 (5 years' experience)

Overall, ethical concepts or ideas were mentioned in relation to this vignette in 17 of the interviews across the two samples, and when discussing the case, the types of ethical issues identified by the English and Finnish participants were broadly similar. This could suggest that social workers in the two nations experience and recognise comparable ethical problems within their practice. Though slightly more participants from England commented on the fact Anna, the educational welfare officer, did not discuss the referral with Kate before contacting social services, this difference could have been related to contrasting policies, including the fact there is currently no formal mandatory reporting requirement in England, unlike in Finland. This could explain why the English participants were marginally more sensitive to the possible breach of Kate's privacy and is a topic explored further in the discussion chapter of the thesis. Additionally, a significant finding from this part of the interviews was the fact that 13 social workers across the English and Finnish samples did not make reference to any ethical issues or concepts when responding to the first case vignette.

5.4 Vignette two responses

As above, for ease of reference the second vignette is presented below:

Vignette Two

You receive a telephone call from a youth worker, Tom, who has concerns about the welfare of a 14-year-old boy, Sam, who attends his youth club. Sam has mild learning difficulties and has recently started talking to other boys online. Tom informs you that Sam shared explicit photographs of himself with another boy, who Sam says is aged 16

(however they have not met in person). Sam had an argument with the boy who threatened to put the photographs online and spread them around Sam's school.

Sam is extremely upset and threatened to commit suicide if anyone finds out about the photographs or the fact he is gay, particularly his teachers and his parents. Sam has insisted that Tom does not tell anyone about what has happened, however Tom felt he had a duty to report this to social services. Tom has not told Sam about the referral.

5.4.1 Identified issues or concerns

As with the previous vignette, participants from both England and Finland identified broadly similar concerns within vignette two, for example, surrounding the sharing of explicit photographs; the risk of grooming/child sexual exploitation; Sam's suicide ideation; his heightened vulnerability related to his learning difficulty; and issues surrounding Sam's sexual identity, and how he was coping with this. Examples from the interviews are presented below:

So Sam's 14 and has got mild learning difficulties, so he's a vulnerable teenager. He's been talking, accessing an online platform and talking to other boys, so he says... there is a lot of potential that he's been groomed... And then mental health, Sam's threatening to commit suicide, about the photographs or the fact he's gay.

English participant 15, local authority 4 (one months' experience)

The biggest worry in this is this risk of suicide of the young person... there are these learning difficulties also, which have to be taken into consideration... But there are

sensitive issues around these pictures, and if this young person is homosexual, and how he wants to deal with that issue also.

Finnish participant 14, municipality 3 (10 years' experience)

Although broadly similar issues were identified overall, there were notable differences in the prioritisation of concerns within the English and Finnish responses. For example, all 15 of the English participants cited Sam's online relationship as a key concern, and these concerns were frequently articulated through the use of similar language; for example, 'child sexual exploitation', 'CSE', 'exploitation' or 'grooming'. These terms were used in 10 out of the 15 English interviews, as demonstrated below:

[T]he risk factors that are jumping out for me, you know, there's potential sexual exploitation. We don't know for certain the identity of this other person...

English participant 1, local authority 1 (10 months' experience)

I think the main issue is the risk of CSE, I think that's the main issue for me.

English participant 10, local authority 3 (3 years' experience)

By contrast, Sam's online relationship was not mentioned at all in four of the Finnish interviews. Additionally, when the relationship was discussed, it was generally considered to be a problem of bullying or the possible criminal disclosure of Sam's private intimate photographs, rather than a potential case of exploitative grooming by an adult, as shown in the quotes below:

[I]t would be very important to find out what has happened on the internet... another boy has been threatening to spread these pictures all over, so what has already been done, have these threats been fulfilled somehow, have there been some criminal acts already?

Finnish participant 12, municipality 2 (19 years' experience)

[T]here is the risk that these pictures will be distributed on the internet against this young person's will. And then it might be the case that this might be a criminal activity, by distributing these pictures against his will.

Finnish participant 14, municipality 3 (10 years' experience)

Another clear difference was the level of emphasis placed on Sam's comments regarding suicide. This matter was mentioned in 14 of the Finnish interviews and 12 of the English interviews; however in the Finnish interviews, participants predominantly talked about Sam's suicide ideation as being of greater concern than his online activities.

I think that the biggest concern in this case is this suicide ideation, and I think that this is quite acute, quite an urgent situation.

Finnish participant 13, municipality 2 (6 years' experience)

It is a serious situation, and always when there is risk of committing suicide, these kind of suicidal thoughts are always serious. And when it's a question of a young person, who is under 18. So it's always, it always has to be taken seriously.

Finnish participant 14, municipality 3 (10 years' experience)

[W]e'd also be looking at potential mental health, emotional concerns of Sam. The CSE stuff would take priority but also the emotional needs of Sam.

English participant 3, local authority 2 (3 years' experience)

[M]ake sure he's aware that the boy who's saying he's 16 online might not be a 16-year-old boy, those kinds of issues. I'd like to check out his mental health as well, saying that he's really upset and threatening to commit suicide...

English participant 7, local authority 2 (2 years' experience)

As the above quotes demonstrate, within the responses there appeared to a greater awareness of, and prioritisation of possible child sexual exploitation among the English interviews, while the majority of the Finnish participants displayed greater concern for Sam's suicide ideation. Thus, while participants from both nations identified relevant risk factors within the vignette scenario, their judgements on the level of risk posed by each risk factor differed, and this difference appeared to be connected to the national contextual environment. This observation would support the findings of studies by Benbenishty et al. (2015) and Brunnberg and Pećnik (2007), who observed similar differences in risk attitudes and approaches to decision-making among social workers from different nations.

5.4.2 Threshold for intervention

As with the first vignette, all participants were asked how serious the scenario described in vignette two appeared, and whether the case would meet the threshold

for intervention within their team. A number of participants from both England and Finland stated that the example presented in vignette two appeared to be more serious than the previous case, either because of the immediate risk of suicide or the risk of child sexual exploitation. This view was not held universally, however, as some participants explained that the level of risk would depend on the initial assessment of each case and the specific information obtained. Arguably, this could reveal a more analytical and less intuitive approach among some participants compared to others. This apparent variation, with some participants immediately making a risk judgement while others appeared to be more hesitant, is revealed in the below quotations:

I think this one would be more serious, I would put this as section 47.

English participant 15, local authority 4 (1 months' experience)

[T]his is quite serious, because this boy is harming himself, and this risk of even suicide, it's serious. And also, that this is a young person who is trying to find his sexual identity, and these kind of identity problems. So there is a need for support.

Finnish participant 2, municipality 2 (1 years' experience)

[I]'s hard to know [the level of risk]. It might be that like, after two or three years he changes his mind [about his sexual orientation], you never know... So it might be just a little period, or a lifetime situation. So that's why it's very important to research what is going on, and what's the case. But I think it's always when the young people are threatening the suicide, even if it's just like, he's saying [it], it always has to be taken seriously.

Finnish participant 1, municipality 1 (8 years' experience)

Based on the information, they [vignettes 1 and 2] could be potentially equally concerning in terms of risk. Because on the one hand, in case scenario one you have key indicators which are very prevalent in terms of all the learning that we've got from serious cases reviews, the characteristics involved, neglect, possible DV [domestic violence], that's a big one. And then you've got a young person here with learning difficulties, which makes him really quite vulnerable, and the fact he's sharing indecent images...

English participant 12, local authority 3 (1 years' experience)

Unlike some of the participants' responses to vignette one, no participants from either sample questioned the suitability of the case for assessment by their team, or suggested the case should be dealt with by an early intervention/preventative service. Indeed, many of the participants made reference to the fact Sam's comments about suicide had been reported directly by a professional, whereas the concerns about domestic violence in vignette one were not, at this stage, confirmed. This reveals how participants' attributed more or less weight to information within the vignettes when making their risk judgements, as illustrated in the below quote:

On the face of things, with the other case [vignette one], we don't really know until we go and explore. We don't really know with this one, but what we do know is he's straight away telling us 'I have put pictures online, I'm thinking of committing suicide' ... immediately for me, we've got some child protection concerns.

English participant 8, local authority 2 (6 years' experience)

5.4.3 First steps in responding to the referral/notification

As with the previous vignette, participants were asked what their first steps would be if allocated the case outlined in vignette two. Due to the concerns surrounding possible sexual exploitation and/or the threats surrounding the images, 14 English participants and nine Finnish participants stated that they would involve the police in their intervention in some way, or stated that they considered the matter to be of potential criminal relevance. Three of the English participants also discussed involving their manager and holding a strategy meeting (a multi-agency discussion to decide whether a full child protection investigation should be initiated). No similar process or involvement of managers was discussed by any of the Finnish participants; more often the Finnish participants spoke only about reporting the incident to the police, as highlighted in the below quotes:

The manager might want a strategy discussion with police, before we make a decision on what to do next. Because there is an indecent image being shared online, so child protection concerns...

English participant 9, local authority 2 (2 years' experience)

[T]here is this concern, do they [Sam] know that this is a crime to distribute these pictures, and perhaps it's a police issue in that case. To be reported to police.

Finnish participant 3, municipality 1 (2 years' experience)

The above quotes again seem to suggest there was a different interpretation of the issues among the English and Finnish participants. Whereas the English participants

referred to involving the police due to the possibility of grooming, the Finnish participants appeared to focus on the fact that Sam's personal images had been shared illegally without his consent. The fact that many of the English participants discussed involving their manager in the case, while none of the Finnish participants mentioned this, was another key difference. However this could be explained by the contrasting processes surrounding child protection investigations in the two countries, and the fact in England, the statutory guidance in force at the time of the interviews stated that social work managers were *required* to be involved in any decision to undertake a child protection investigation (HM Government, 2015). In contrast, in Finland, there was and continues to be no such requirement for managerial involvement in assessment decisions (Ministry of Social Affairs and Health, 2007).

As regards making contact with Sam and/or his parents, as with the previous vignette, a small number of participants stated that they would first ask Tom, the youth worker, to discuss the referral directly with Sam. Regarding next steps, there was some divergence in how participants from both samples stated they would approach the case. Some participants considered that due to the fact Sam was under the age of consent and had learning difficulties, it would be necessary to first gain consent to work with Sam from his parents, despite the fact this would be going against his expressed wishes. A few participants reflected upon this as a difficult ethical dilemma, while other participants did not elaborate on their decision to consult Sam's parents in the first instance, as shown in the below quotes:

[H]e's 14, you can't engage, you'd have to contact his parents. You'd have to talk to his parents, which is very difficult because if he's concerned about his sexuality and

how his parents would react to that, that's a bit of a minefield, because I wouldn't be able to go to the 14-year-old first and talk to him, because I'd need consent.

English participant 6, local authority 2 (2 years' experience)

[M]y obligation would be to discuss the situation with the parents. I couldn't as an official go around parents' backs and meet the child without the parents knowing, I would have to tell them. Of course, I would try to be delicate and sensitive about how to go about the whole discussion because I wouldn't know how the parents would react...

Finnish participant 9, municipality 2 (1 months' experience)

So you might want to be ringing the parents with this... So you'd be approaching it a bit differently, you wouldn't be doing an unannounced visit with this one. Yeah, so you'd be having a conversation with parents, and then get permission to speak with school, and come up with a bit of a plan for how to engage with them.

English participant 9, local authority 1 (2 years' experience)

[A]rrange a meeting [with Sam], but before that, the parents should be informed, even though the child resists to inform the parents... from the perspective of child welfare, it's really urgent, so to call the parents, in this case.

Finnish participant 2, municipality 1 (2 years' experience)

In contrast, another group of participants stated that they would instead speak with Sam first. Some participants justified this on the basis that Sam was aged 14 and would therefore be mature enough to be consulted first, while others judged that this would be the most sensitive way to work with Sam given the delicacy of the situation.

Due to the nature of it, the sensitivity, I think we'd have to talk with the young person first, in a safe place, maybe a youth centre where Tom could be present as well.

English participant 1, local authority 1 (10 months' experience)

Ok, so go out to see Sam, go out initially and have a conversation with Sam about how, what's happened, get his views, what's been going on. Obviously the police would be involved, it would be a joint police visit because of the nature of what's happened... [Then] we'd be working with the family around supporting Sam...

English participant 15, local authority 4 (1 months' experience)

I would arrange a meeting with Sam, and I think I would meet Sam in this youth club maybe, maybe alone, or maybe with this youth worker. Because there is this issue of this homosexuality, and his fear that he doesn't want to tell about this issue with his parents. So I would first try to calm the boy, and then after this I would meet the parents...

Finnish participant 13, municipality 2 (6 years' experience)

Sam doesn't want to tell mother or teachers, and he's already 14, so maybe I would not tell teachers at first. Of course I would discuss with Sam that it would be better to talk to mother or father about this situation, because they may not know how serious the situation is... [But] I think that Sam is already 14, so I would start with him.

Finnish participant 11, municipality 2 (4 years' experience)

The above quotes reveal that, across both the English and Finnish samples, participants made different decisions on how to proceed with this case using a range

of justifications. For example, in the quote from English participant 6, above, the participant stated that they would need to contact Sam's parents in the first instance due to agency procedures; however, the narrative suggests that the participant felt conflicted about this choice. In contrast, other participants stated they would contact Sam's parents first, but did not seem to display the same level of internal conflict. Similarly, while some participants stated they would instead contact Sam first, as this would be the most sensitive and empathetic response, other participants, such as Finnish participant 11, justified contacting Sam first on the basis of his age and his rights as a young person. Therefore across the two samples a variety of procedural, relationship-focused and rights-based justifications were used to rationalise decisions on how to respond, with no apparent pattern related to the participants' workplace, nationality or personal characteristics.

5.4.4 Ethical engagement

The above discussion around how participants would respond to this case highlights differences in the nature and extent of ethical reflection observed at an individual level. However, as with the responses to the vignette one, the types of ethical issues identified by participants were similar and related to the broad ethical principles of human rights, social justice and professional conduct. Specifically, participants from both samples made reference to the need to be open and honest with Sam and encourage Tom to discuss the referral with him; the need to acknowledge Sam's wishes and balance his right to self-determination with the need to protect him; and the need to recognise any possible discrimination he may be experiencing related to

his sexual orientation. As with the previous vignette, in general participants did not use specialist terminology or explicitly ethical language when describing these issues.

The most common ethical issue identified in vignette two was the need to balance Sam's wishes and right to self-determination with the need to keep him safe. Although participants within and across both samples stated that they would approach the situation in different ways, the issue was nonetheless identified and/or expressed as a dilemma in ten interviews, by four English participants and six Finnish participants:

Ok, it's a tricky one actually. Obviously the risk factors that are jumping out for me, you know there's potential sexual exploitation... The complicating factor is that Sam doesn't want his parents to know, I suppose, which is probably quite a natural thing to feel... I mean it's complicated a bit that, you know he's a 14-year-old man, potentially quite independent and doesn't want this talked about, so we'd have to be quite delicate.

English participant 1, local authority 1 (10 months' experience)

[O]bviously this boy has some issues that he wants to protect, for example, this homosexuality issue, but still even if he has these kind of things [secrets], it's very important that this boy knows what's going on, so it would be very important to meet, together, so that also this youth social worker would be present. And very, very quickly I think, because there is this concern about maybe committing suicide... I would want to know, also in this case, it's very important this child's own views, what does he think about his parents, what kind of relationship does he have with his parents?

Finnish participant 12, municipality 2 (19 years' experience)

The second most common ethical issue discussed was the fact that Tom, the youth worker, had potentially breached Sam's trust and confidentiality by referring the matter to social services without first discussing it with Sam. This issue was mentioned by seven participants; five from England and two from Finland. The fact that more English participants made reference to this issue may, like the previous case, be related to the lack of any mandatory reporting requirement in the English context.

I think he should have told Sam, the youth worker, he should have told Sam that that's something he can't not share with others. He [Tom] should have told him, in my view, because it's about trust, and he's going to carry on working with that boy hopefully. There are some things you just can't not tell others about.

English participant 8, local authority 2 (6 years' experience)

I'm also worried about this, because Sam has told that he doesn't want that child welfare would be told about this situation. What will he possibly do when he now finds out that this notification has anyway been done to the child welfare office?

Finnish participant 7, municipality 2 (2 years' experience)

Finally, in six interviews participants identified the possibility that Sam may be experiencing discrimination linked to his sexual orientation. For example, participants made reference to helping Sam feel comfortable with his identity, and/or raised concerns that Sam may be having suicidal thoughts as a consequence of

discrimination. This issue was mentioned in three English interviews and three Finnish interviews. However, participant 8 from Finland reflected on this matter to a much greater extent than any other participant, as illustrated below:

I think Sam is having some kind of phase in his identity and he is exploring and finding out what his sexuality is... But he's been depressed and has threatened suicide, so that tells me a story that he feels that it's wrong, what he's doing is wrong... But definitely, I would want to get the message to Sam that it's ok to be whoever you are, as long as you're not hurting anyone. I think that's an important message in this case, because definitely, Sam, if he is exploring in this area and finding out who he is, he would need that message to be clear to him. Because some parents can be very conservative about homosexuality, but he needs to know that it's ok.

Finnish participant 8, municipality 2 (10 years' experience)

[F]eeling like they want to kill themselves. Is it because they're confused about their sexuality, you know, if people find out they'd be in trouble?

English participant 5, local authority 2 (12 years' experience)

Overall, ethical issues or concepts linked to the second vignette were discussed in 18 interviews across the two samples. As with the previous case, over a third of participants across the samples, 12 in total, did not make reference to any ethical issue when responding to vignette two. When the responses for vignettes one and two are put together, nine participants across both samples, with a range of experience levels, made no reference to any ethical issues when discussing either case. This

finding suggests that ethical engagement and reflection may be chiefly influenced by individual-level factors, in terms of how individual social workers analyse case information and express their internal deliberations, and not to broader organisational or national contextual drivers.

5.5 Vignette responses summary

The responses to the two case vignettes highlight both similarities and differences in the English and Finnish participants' perspectives about the cases and how they judged they would respond to each scenario in practice. In general, all participants from England and Finland identified broadly similar risk factors within the two cases, and all recognised a need for intervention, whether this be provided through statutory child protection or early help/preventative services. Similarly, a number of participants from across England and Finland identified similar ethical issues within the vignettes, including issues related to confidentiality, respecting service users' right to self-determination and combatting discrimination.

Differences between the samples emerged in relation to the prioritisation of certain risk concerns. For example, while all of the English participants discussed the issue of previous child removal in response to the first vignette, a third of the Finnish participants did not refer to this issue at all. Regarding the second vignette, all of the English participants raised concerns about the online relationship involving Sam, and most connected this to potential child sexual exploitation. While most of the Finnish participants also discussed the online threats Sam had received, fewer participants directly connected this incident to grooming; instead, more of the Finnish participants

prioritised Sam's apparent suicide ideation. These differences suggest that the participants' may have been more attuned to certain risk factors as a consequence of their national environment.

In addition, differences were observed in the nature and degree of ethical reflection within many of the participants' responses at an individual level. For example, a number of participants from both samples demonstrated a high level of reflection when deliberating on how to respect Sam's wishes while keeping him safe, or when considering how to respond to Kate's apparent non-engagement. Other participants however, again from both samples, seemed to be less reflective, and in nine interviews participants did not directly engage with any ethical issues or concepts when discussing the cases. This pattern did not appear to be related to the participants' gender, their level of education or professional experience, their organisation or national context. While the level of ethical engagement and reflection therefore varied and was absent in some of the responses to the vignettes, all of the participants across both samples identified presenting risk factors in the two cases. As such, a key finding from the vignette responses is the fact that overall, participants from both England and Finland tended to focus their discussion on presenting risk factors within the scenarios, with less focus on the potential ethical dilemmas raised.

Many of the above trends are considered further in the following chapter. Chapter seven then considers how these findings relate back to the central research questions guiding the thesis and existing academic literature.

Chapter Six

Findings: Interview Responses

6.1 Introduction

In this chapter I present the results of part three of the data collection process: the interview. After responding to the two case vignettes participants were asked a series of semi-structured interview questions, the results of which are presented below in respect of each question. Overall, and as with the participants' responses to the vignettes, a range of similarities and differences were identified in how the participants described their practice decision-making and how they experienced and responded to ethical dilemmas. For example, participants described broadly similar processes and timescales for responding to new referrals, and across both samples participants discussed how organisational restructuring had affected their work. However, notable differences were identified related to the range and nature of the services available to children and families in the English and Finnish contexts, as well as the level of professional discretion afforded to participants across the two samples.

Across both samples, having to access to support for decision-making and for resolving ethical problems appeared to be critically important. Additionally, although the types of ethical problems experienced by the participants were broadly similar, where, and from whom participants obtained support for resolving dilemmas varied considerably. In England, participants largely depended upon their line manager for support and described a more hierarchical, supervised approach to decision-making.

In contrast, the Finnish participants described a wider support network and generally obtained support from co-workers or team colleagues in the first instance; revealing a shared and more horizontal form of supported decision-making. This chapter explores where these trends were most evident in the participants' interview responses, and in chapter seven, the discussion chapter, I consider possible explanations for and implications of these findings, relating the findings back to the study's research aims and existing literature.

6.2 Interview responses

6.2.1 Responding to new referrals/notifications

When the participants were asked how new referrals/notifications are dealt with in their teams, participants from both samples described similar processes, focusing on how agencies in the two nations organised their work and implemented their statutory duties. In particular, similarities were noted in relation to the way new referrals were processed by first-contact reception teams, before being transferred onto regional teams for further assessment, where appropriate. In Finland, participants reported that this initial screening was undertaken by a social worker or *sosionomi*, whereas in England, screening was undertaken by a social worker or unqualified worker, alongside multi-agency colleagues in the case of local authorities 2 and 3, then authorised by a manager. Participants from both samples also referred to the timescales attached to these assessments, as shown in the below quotes:

So the front door team will make the initial decision on whether it's a referral or not, they should be responding within 24 hours, that's the government timescale... on their team they've got, initially, sort of [unqualified] family advisers... the managers are all social work managers there, so they'd make the decisions.

English participant 1, local authority 1 (10 months' experience)

So there is this team who makes this initial assessment, this emergency assessment team, and they make this initial assessment within seven days... it would be a social worker in that initial assessment team who makes the decision.

Finnish participant 15, municipality 1 (3 months' experience)

These responses suggest that despite claims the English and Finnish child protection systems vary and are characterised by different orientations of practice (Gilbert, 1997), obvious similarities exist in how agencies across the two nations assess new referrals, which could be viewed as evidence of a convergence in practice approaches. However, although overall screening processes were comparable, the involvement of managers at this stage did appear to vary, with referral decisions being authorised by managers only in the English context. The involvement of managers was also discussed in relation to work allocation processes. In England, the majority of participants described how cases requiring further assessment were allocated to them directly by managers. In contrast, in Finland, participants described how cases were allocated in weekly team meetings, where staff would jointly decide who should take on new cases. The Finnish participants therefore appeared to have more direct authority over case decisions at this early stage of the intake process.

[T]he manager on our team tends to delegate the most emergency cases there and then, so the section 47 then would be given to a more experienced member of staff... If it was felt it could wait until the end of the duty week, then the manager would keep it on her desktop on the computer system, and each night they would allocate the cases to the individual social workers.

English participant 4, local authority 2 (2 years' experience)

[B]etween these teams the social workers together make a decision, if some case is allocated to this team, who out of these social workers is going to take this new child to her or his responsibility...

Finnish participant 7, municipality 2 (2 years' experience)

6.2.2 Deciding how to proceed with cases

When asked about how assessment decisions were made following a new referral/notification, clear differences were observed related to the support participants received when undertaking initial case tasks and visits to families. For example, 11 Finnish participants described how they worked on cases jointly with their 'co-worker, 'partner' or 'pair'; this usually meant a *sosionomi* or another social worker on more complex cases. Such accounts were noted in interviews with participants in different municipalities, suggesting that this joint-working arrangement occurs in regions across Finland. Joint-working arrangements were not discussed in the same way by the English participants; where participants did refer to joint visits, the visits tended to be conducted for reasons of safety or to train new staff members, and not because of any formal working arrangement. An exception was

noted in local authority 2, however, which had recently restructured its service into a model of systemic practice units. Here, participants described how they regularly worked on cases together within their small team or ‘pod’, though individual social workers retained formal responsibility for each case, overseen by a manager. Differences in how the participants described such joint-working arrangements are highlighted in the below quotes:

[The] social worker works together with the socionom [sosionomi], who has this lower degree from polytechnic. So they work as a pair... the social worker is the one who leads the process and makes the decision. But of course they reflect with the pair, so this is an important part of the work.

Finnish participant 2, municipality 1 (1 years’ experience)

Well usually we have a work partner, so we don’t make assessments or decisions alone... It’s usual in that way so we can have conversations and discuss our observations about the family.

Finnish participant 9, municipality 2 (1 months’ experience)

[W]e’ll go out in pairs, for example, if we’ve got an ASYE [newly qualified] student who’s less experienced and the manager wants two of you on a case... [Also if] the mother’s partner had been a violent or hostile person, it may be that we’d do a joint visit if that were the case, if he sounded aggressive on the phone or hostile or mum was massively resistant, she [the manager] might say “both of you go out”.

English participant 14, local authority 1 (4 years’ experience)

We work on a pod system where there is two or three social workers and a social work assistant who sit on a pod, with the intention of jointly working each case, although there is still that one allocated worker per family.

English participant 3, local authority 2 (2 years' experience)

As regards assessment decisions, two-thirds of the Finnish participants described how they had the final authority and responsibility for decisions, but in practice their decisions were informed by the advice and input of their work partner and/or wider team. In contrast, in England, over half of the participants discussed how their assessment decisions needed formal authorisation from a manager. This contrast indicates that participants across the two samples received decision-making support from different sources and highlights the differing levels of discretion for case decisions afforded to the English and Finnish participants. Furthermore, in England, three participants from two different local authorities made reference to the use of structured decision-making tools, used either for assessing a child's level of competence to make decisions for themselves or for assessing the risk of child sexual exploitation. Regarding the latter assessment tool, one participant described how the 'CSE [child sexual exploitation] toolkit' could effectively overrule their own assessment decision.

I don't get authority to sign assessments off and say "Yes, this is what I or another social worker thinks", that decision is left to the manager... If I do a CSE risk assessment and it comes out as a medium risk, then it has to stay open as a child in need plan, so your decision-making is overridden by the CSE toolkit.

English participant 10, local authority 3 (3 years' experience)

[Y]ou get your plan sent off [to a manager] and it'll either come back saying correct this, or this hasn't been done, or I'm in agreement with it. Once that's authorised you can give it to the family.

English participant 1, local authority 1 (10 months' experience)

We think about this [assessment] with our partner, together the two of us, but the social worker is responsible for the children's affairs. She or he signs this decision.

Finnish participant 6, municipality 2 (2 years' experience)

[S]ocial workers, yes. They do the decisions, but then we have this, every week we meet, the whole team, and then we are discussing the cases together. And it's very often that it's like, they [social workers] need some kind of like, other opinion...

Finnish participant 1, municipality 1 (8 years' experience)

The above quotes reveal how different procedures and accountability structures in the two nations influenced the participants' discretion when forming judgements and making case decisions. While the Finnish participants' decisions appeared to be more strongly influenced by their co-workers, the English participants' decisions seemed to be shaped to a much greater extent by managerial oversight and structured decision tools. This key finding correlates with the conclusions of research by Berrick et al (2016b), which similarly noted different authority and decision-making structures in the English and Finnish contexts. This theme of supported 'horizontal' decision-making, versus supervised 'vertical' decision-making, also emerged later in the interviews, as discussed in section 6.2.6 of this chapter.

6.2.3 Support services for children and families

During the interviews participants were asked to describe the support services available to children and families in their local authority/municipality. This question was asked to get a sense of whether service availability may play a role in the participants' decision-making on cases, or contribute to feelings of ethical stress if participants' considered that services were not available to meet local demand.

Across both samples participants described a range of services, from intensive family support interventions to more preventative, early help services. In both nations these services could be provided by the local authority or municipality directly; be purchased by the local authority or municipality, then provided by a private or non-profit supplier; or a referral for support could be made to the non-profit sector, or health sector in the case of mental health support. Although it was not my intention to conduct any quantitative analysis of the interview data, when listening back to and coding the interviews, clear differences emerged in the frequency of references to services mentioned within the English and Finnish participants' responses (see Table 4). Notably, the Finnish participants referred to more than double the number of support services compared to the English participants, which suggests there may be a greater range of support options available to children and families in the Finnish context. For instance, services such as 'support families' and 'family rehabilitation' (an intervention which involves placement of the whole family within a residential support unit) were mentioned by over two-thirds of the Finnish participants, yet such services were not mentioned by any English participant. Additionally, within their

interviews, two-thirds of the English participants referred to problems such as a lack of resources or service waiting lists. Though four Finnish participants also mentioned resource pressures, or concerns regarding the increased privatisation of services, six other participants discussed how service availability for families had *increased* following the Social Welfare Act 2014, and one Finnish participant stressed that financial issues were not a problem in her municipality, as highlighted below:

I don't have this problem, for example, that my employer says, "Now save money", I don't have this problem. And I'm very happy about it... So if I need to give support, I can give it.

Finnish participant 10, municipality 2 (4 years' experience)

[W]e'll make the family know there's a waiting list, and sometimes we'll ask [the family support team] to put a phone call in and say, "How are things? We haven't forgotten you", just to keep them engaged really. And sometimes you can go out and a month down the line, the family can go, "Do you know what, forget it now, I've waited a month". That can be disappointing.

English participant 11, local authority 3 (1 years' experience)

A further difference noted across the samples was the fact that more English participants deviated from the topic when answering this question, compared to the Finnish participants. For instance, four English participants discussed matters other than support services, such as the importance of parental engagement, the process of applying for a care order or other procedures or work responsibilities. Such digression did not occur to the same extent within the Finnish interviews and there

was more consistency in the Finnish participants' responses. This difference could indicate that the Finnish participants may have been more informed about, or confident in their knowledge of local service availability. Another perspective may be that the Finnish participants were more able to access their knowledge of local services when put 'on the spot' during the interview interaction, which could indicate different thought process or way of thinking about service provision. Alternatively, the difference may simply indicate that there were more service options locally available in Finland to talk about. This observation is of relevance as social workers' decisions regarding how and when to support a child and family, and their processes of deliberation surrounding this, are likely to be influenced both by the services on offer and by practitioners' knowledge of, and ways of thinking about service availability. Two examples which illustrate the differences between the English and Finnish responses to this question are presented below. While the Finnish participant lists the many services available in her municipality, the English participant provides a less focused response, and digresses onto discussing different types of social work assessments conducted in their local authority.

So these open care services, we have different kinds of services. For example, we have family work, then we have social counselling and social work services, and also we have support persons, support families, professional support persons, and we can purchase all sorts of services. For example, family rehabilitation we can purchase. And also we have this kind of 'first home', this is this kind of institutional rehabilitation for newborn mothers and babies, and maybe the whole family can be placed, newborn child, and they are supported there. And then these kinds of safe

Table 4: Support services referred to by participants

Type of support service	Finland (References*)	England (References*)
Family support	15	13
Support person or support family	12	0
Family rehabilitation/family placement	10	0
Mental health support	9	2
Out of home placement for child/ren	8	0
Financial support	7	1
Substance misuse support	6	6
Home help services	5	0
Mother and baby placement	3	0
Child day care	3	1
Youth work	3	2
Family counselling	3	2
Respite holidays	2	4
Supported living for young people	2	0
Domestic violence services	1	5
Family group conferences	0	3
Youth justice intervention	0	1
	Total references: 89	Total references: 40

*‘References’ refers to the total number of participants who mentioned this service.

homes when there are family violence issues, we can also offer. And then we have holiday activities... [Also] home help services, we can use... So we can offer very many kinds of services. For example, we can also purchase cleaning services, and I have even bought a kind of service where a dog can be accommodated, and it helped the family. So whatever you can imagine...

Finnish participant 13, municipality 2 (6 years' experience)

The services are changing all the time, you know the early help, the cooperative working, the family support that you can refer to for the early help... In terms of if it's domestic violence, we've got [local support service], and we can do work with people as well. So we'll do a lot of direct work. If it's sexual [exploitation], this sort of thing, there's [local support service]... Then we sort of try to meet the various gaps. So we can do direct work, safety work and sexual offenders' assessments. I think one of the difficulties is that people don't realise what we do. I think sometimes people think that social workers just go out and do an assessment, either remove, or keep on a plan, but we do private law now and legal aid. We're getting more and more section 7s and section 37s to complete, and then you're acting like, you've got two parents, and you're trying to think for the child, and you're trying to navigate between these two parents and look what's in the best interests of the child, because they've got no solicitor. They can't get legal aid. So we do a lot of that. Then we do sex offender risk assessments and loads of different assessments.

English participant 5, local authority 2 (7 years' experience)

The fact that fewer examples of practical support were present in the English participant's narrative could, as discussed above, be an indication of more limited service availability in the English context. The issue of service availability also

emerged later in the interviews when participants were asked to describe the ethical issues they faced in their work (see section 6.2.5, below), and connects to the findings of research by Mänttari-van der Kuip (2016), which directly linked resource constraints to feelings of ethical stress among social workers.

6.2.4 Changes in child welfare

To gain a more detailed picture of the participants' perspectives on the changes to child welfare support in their agency and their national context more widely, each participant was asked to describe if and how their work had changed during their career. Similarities were identified in many of the participants' responses to this question, as over half of all participants, across England and Finland, described organisational restructuring as one of the key changes they had experienced.

References to restructuring among the English participants were more often negative when compared to the Finnish responses. For instance, some English participants discussed increased workloads or the loss of human resources which had resulted from repeated reorganisations. Exceptions were noted, however; for example, in local authority 2, one English participant spoke positively about the move towards systemic working and the additional support this had provided.

[W]e have experienced very many changes since I have started here. For example, we first used to have this initial assessment team, where we had workers for children aged from zero to five years, then workers for six to 12 years old, then workers for 12

to 17-year-old children... Now social workers in this open care [team], we all do these assessments for child welfare need...

Finnish participant 6, municipality 2 (1 years' experience).

[They] got rid of the children with disabilities team, so we lost all that knowledge of workers, because workers from the children with disabilities team were placed into the child in need/child protection team. That's not what they wanted to do, that's not what their experience was, so a lot of the staff handed in their notice and left... They've now re-established the children with disabilities the team, but the depth of knowledge is not something you can teach...

English participant 13, local authority 1 (9 years' experience)

[T]he systemic way of working has been a massive cultural change for [local authority] but a really positive one. Because I think it's reduced the feeling of isolation I think that perhaps we used to feel... Because obviously before, it was kind of like, you were making decisions and the buck stops with you, kind of thing, if anything went wrong. But now it feels really supportive...

English participant 13, local authority 2 (2 years' experience)

In addition to changes related to organisational restructuring, a number of participants from both samples discussed shifts in practice approaches. References to practice change were often positive, as participants discussed the introduction of new practice models, such as *Signs of Safety* (within the English sample) and moves towards greater child-focus (within the Finnish sample), as well as shifts towards early help and increased preventative support, particularly in the Finnish interviews.

Additionally, within the Finnish sample, almost half of the participants made reference to legal changes such as the introduction of the Social Welfare Act 2014, implemented in the year prior to the interviews. Although most of the Finnish participants spoke of the benefits of this new legislation, some also mentioned the impact it had had on their day-to-day work, such as how their assessments under the Child Welfare Act 2007 had now become more complex. In both England and Finland, a minority of participants also attributed the increased complexity of cases to wider welfare cuts, which they judged had led to increased problems for families, while some English participants spoke of the impact of specific high profile cases on their workload:

[I qualified] literally just after the whole benefit reform and things like that. So I found it really difficult, so many families just facing poverty... [I]t's kind of like, public perception as well, so when you get Baby P cases and stuff like that, referrals go sky high.

English participant 6, local authority 2 (2 years' experience)

The one big change has been that there is more emphasis put on the child, the best interests of the child, and hearing the child, that's been a very remarkable change in child welfare in Finland.

Finnish participant 3, municipality 1 (2 years' experience)

[W]e get the more difficult cases now, here in our child welfare social work cases, and our customers, we can see very many different kinds of problems, and they are more difficult and more challenging than they used to be. And these more easy cases

are treated in these early support services [under the Social Welfare Act 2014], so I have noticed that our work here in child welfare has become more mentally challenging work.

Finnish participant 12, municipality 2 (19 years' experience)

Changes related to working conditions were also discussed by some of the English participants, who spoke of increased referral numbers, caseloads and staff turnover. This issue appeared to be a feature of particular local authorities only, however, which suggests that working conditions may be related to organisational factors and/or increased local demand for social work support. Research by Broadhurst et al. (2010) in particular revealed how social workers in individual local authorities in England were required to adopt process 'shortcuts' to meet local demand while adhering to national service targets. The response from English participant 9, presented below, suggests that some of the processes aimed at managing workflow, described by Broadhurst and colleagues, may still be occurring in England. Exceptions were noted however, for example in local authority 3, where the English participants described a recent shift towards increased investment in staff and services. Within the Finnish interviews one participant mentioned increased work pressure connected to assessment timescales, however this did not appear to be a view held across the sample, with the majority of the Finnish participants' instead focusing their responses on legal and practice changes. Examples of participants' comments concerning working conditions are highlighted in the quotes below:

[W]e've had an increase in referrals, so there has been more time restraints on social workers, so some of things we were expected to do as a minimum practice standard, maybe that's not the same anymore. Things like making sure assessments are completed within 15 working days... now, some of my assessments are coming up to day 40, but I've not managed to complete the work. I think that's the main difference that I've noticed. When I started here we had eight social workers; we had four, nearly five experienced social workers on the team. I think we're down now to two and then me... I think it's got more difficult in terms of the time we have to spend on cases.

English participant 9, local authority 1 (2 years' experience)

[A]s an ASYE [newly qualified social worker] I went up to about 41 cases, I was out on section 47s within my first few months, alone. There were staff leaving left, right and centre... [Now we] have all got new computers, we're having a new management information system, we've got new mobile working devices, new smart phones. You know, we as social workers, we feel like we're being invested in more.

English participant 10, local authority 3 (3 years' experience)

[T]his kind of evaluation towards child welfare has increased in Finland... child welfare assessments in certain timelines, for example, within three months... so there is a pressure towards workers because the amount of clients is quite high.

Finnish participant 3, municipality 1 (2 years' experience)

Overall, the participants' responses and discussions around the changes that have impacted their work highlight the dynamic nature of child welfare policy and practice, nationally and locally, within the two nations. However, the fact that a

greater number of the English participants reported negative changes related to, for example, increased demand for services and increased workloads, could help to explain why many of the English participants also reported resource constraints as an ethical issue, as discussed further in the section below.

6.2.5 Experiences of ethical issues

After querying the changes participants had experienced during their career, I went on to ask about the types of ethical issues the participants thought impacted on child protection social workers' day-to-day work. When asking this question, I avoided defining 'ethical issues' and allowed participants to interpret the concept in their own way, in view of the diversity of practitioners' perspectives on ethics, as discussed in previous research (Banks & Williams, 2005). The results from the interviews appear to support Banks and Williams' findings, as there was evidence of variation within the participants' responses. For example, and as with the participants' responses to the case vignettes, there were differences in the level of detail provided by participants when describing the ethical issues they experienced. While some participants offered in-depth, highly personal responses, used 'specialist' ethical terms and/or acknowledged the many ethical issues that impacted on their work, others provided more concise answers, often using non-specialist language, and a minority of participants appeared to find it difficult to think of examples of ethical issues during the interview interaction. As this variation was observed across both samples and across different local authorities and municipalities, this finding suggests that the way social workers think about ethics may be related more to individual

characteristics and personal perspectives, as opposed to national cultural attitudes or organisational factors. Some examples of this variation in the responses are presented below. In the first quote, the participant offers a brief response using non-specialist language when describing an issue involving discriminatory attitudes held by other professional groups. In the second quote, the participant refers explicitly to the ethical concept of human rights and describes a deeper, more personal experience of ethical conflict.

There are quite a few [ethical issues] that can come up. Some of it can be, a family can be difficult so other professionals don't like them very much... then they don't, sort of, get the right support and it's challenging that, with professionals. That happens. It can happen. Not common, but it does happen. It can happen but it shouldn't happen.

English participant 5, local authority 2 (12 years' experience)

It's doubts about, am I breaching their human rights? Am I able to, can I justify that, the level of risk to safeguard? If this is questioned in the future and I'm held to account for this, have I made the right decision? ...I think there are a lot of dilemmas, like when you can't uphold the wishes of the child because of risk factors, or when a child makes a disclosure and there will be a strategy [meeting], but it's not enough to remove that child at that point. And although you've got protective factors in place, like an auntie might stay the night, you know there is going to be a point when you're walking out of the house and the mum is saying, "It's fine, we'll get the help we need", and you think, what's going to become of them now I've gone? And you have to walk away.

English participant 11, local authority 2 (1 years' experience)

Regarding the specific types of ethical issues experienced, the majority of participants from both England and Finland described challenges related broadly to respecting service users' human rights, promoting social justice and/or practicing in a professionally appropriate way, echoing the core principles outlined in the IFSW/IASSW's 2012 *Statement of Ethical Principles*. For example, participants frequently discussed the difficulty of respecting service users' rights to self-determination when carrying out their powerful professional role. Issues related to maintaining professional boundaries were also discussed, while a minority of participants, particularly from England, cited ethical problems related to organisational and local resource constraints.

Across both samples, the most common ethical issue mentioned by participants related to the challenge of balancing risk, uncertainty, children's best interests and parents' human rights. Eight participants from Finland and five from England discussed this problem, in particular, the difficulty of deciding what may be in a child's long-term best interests, particularly regarding removal decisions:

[T]here are many, many ethical issues, but one is always this, what is really the best interests of the child? Is it the child's best interests if the child is taken away from the family, and placed, for example, outside home? Or how [we] can support the family so that the child will be there with the parents?

Finnish participant 2, municipality 1 (1 years' experience)

[Y]ou're deliberating over permanency, that has given me an awful lot of sleepless nights, because you're trying balance the rights to family life, their identity, with the parent's right and involvement in that child's life. And you're trying to balance that with working out long-term what is in the best interests of this child. Because you can't predict, and there isn't enough research...

English participant 12, local authority 3 (1 years' experience)

Related to the above, four English participants and three Finnish participants discussed specific challenges associated with respecting, or not being able to respect, a child or parent's wishes and right to self-determination. Connected to this, one English participant and five Finnish participants also referred to the challenge of ensuring one's level of intervention is appropriate and not too intrusive in private family life.

I suppose, the right the family or parents have to self-determination, to make their own decisions, is a big one really. I think, I've been out to families, similar to the first case study, where the parent has been quite hostile to services... I've gone out there and actually I've found myself agreeing with the family. A family has a right to choose what to engage with and how to bring up a child. And I suppose my view sometimes is that if that's not causing harm to their child, then that's their right to do that.

English participant 1, local authority 1 (10 months' experience)

A client's right to make decisions of his or her own life. Especially in these cases where these interventions have to be done. So it's a very big ethical issue, what

actions are really needed... How does this self-determination and a clients' own right to influence his or her own issues, how to ensure it is respected?

Finnish participant 14, municipality 3 (10 years' experience)

In addition to issues related to human rights and children's best interests, the second most common ethical issue discussed by participants related to the broad principle of social justice. Specifically, within the English responses, six participants mentioned problems related to discrimination and the oppression of service users, including oppression caused by the child welfare system itself. For example, participants discussed oppression related to, in their view, unfair organisational policies or approaches, other professionals' prejudicial attitudes or the challenges of managing cultural differences appropriately. Two Finnish participants also highlighted problems related to organisational policies or issues concerning interagency cooperation:

I think domestic violence is a good example... You predominantly, what we see is a lot of single parents, particularly females, as opposed to fathers. And also, I think what I've found is one of the dilemmas is there is a lot of focus on the mothers, and not enough on the fathers.

English participant 12, local authority 3 (1 years' experience)

[T]here is lots of emphasis on doing cooperation with other agencies, sometimes it happens that some cooperative partner contacts me and he or she is very curious about knowing some very specific information about this family... the ethical

problem, how can I tell my cooperative partner that I can't tell this information to them? Then straight away all the cooperation will stop.

Finnish participant 7, municipality 2 (2 years' experience)

Fewer participants referred to ethical dilemmas concerning their own professional conduct, suggesting that issues related to human rights, best interests and social justice, discussed above, were of greater concern within the two samples. In the few cases where participants did mention matters of professional conduct, however, they tended to discuss issues related to maintaining appropriate professional boundaries or the pressure of appearing 'professional' in front of others when experiencing internal doubts or conflicts.

[B]ecause we live in the same regions or neighbourhoods with our clients, at what point does it come that, "I can't work with this client because I'm too close to their life"? And at what point this decision has to be made, because the family is familiar to the worker?

Finnish participant 7, municipality 2 (2 years' experience)

When comparing the English and Finnish participants' descriptions of the ethical issues they encountered, overall there did not appear to be any pattern in the frequency or nature of references to human rights, best interests, social justice or professional conduct across or within the two samples. This finding suggests that, although individual-level differences did exist, in general the participants appeared to experience certain core ethical conflicts in broadly similar ways. This finding is

supported by existing research on this subject by authors such as McAuliffe and Sudbery (2005) and Papadaki and Papadaki (2008), who also noted commonalities in the types of ethical dilemmas experienced by child welfare social workers.

Observable differences between the samples were noted, however, linked to the issue of resource constraints. Resource constraints and the inability to offer sufficient support to children and families were referred to as an ethical issue by a third of the English participants, but none of the Finnish participants. This observation relates to an earlier finding from the interviews, discussed in section 6.2.3, regarding the fact that two-thirds of the English participants mentioned restricted service availability or waiting lists when describing the support services available to children and families in their local authority area. Some examples of ethical challenges linked to resource constraints are presented below:

It's service provision, time, bureaucracy, a number of things... me, my colleagues, we're all completely dedicated to the work we do. It's just very difficult sometimes when you're debating with higher management in terms of funding for children, making sure we've got the right services for them, often battling, and it does come down to service provision. Money.

English participant 3, local authority 2 (2 years' experience)

So I think there's a massive gap, and I think this was picked up on the news last night, for young people who don't need admitting to hospital at that point but they need something [mental health support]. And I found that, I was quite horrified really, because as a social worker I felt helpless, and having his family saying, "This

is disgusting, you're social services and you can't do anything", and I thought, yeah, I completely agree with you. But there's not a lot out there.

English participant 15, local authority 1 (10 months' experience)

A further difference between the English and Finnish responses was the fact that a larger number of the English participants referred to specific cases when describing the ethical issues they encountered in their work, as illustrated in the above quote by English participant 15. This occurred in nine of the English interviews but in only two of the Finnish interviews. One possible explanation for this difference may be that the Finnish participants were more able to discuss ethical concepts in indirect or abstract terms, whereas the English participants may have felt more comfortable articulating ethical dilemmas and issues in relation to specific cases. This apparent difference in the way the English and Finnish participants reflected upon ethical issues, as well as their experiences of ethical dilemmas more generally, are explored further in the subsequent discussion chapter.

6.2.6 Managing ethical dilemmas

The final question the participants were asked during their interview related to how they respond to and deal with ethical issues in their work. A striking similarity between the English and Finnish responses was noted here, as all participants across both samples referred in some way to seeking support and advice from other people. This finding highlights that, for the social workers in this study, resolving ethical dilemmas and making complex decisions was not an individual activity, but a

collective, shared effort; a finding also noted in previous research by Rossiter et al. (2000) and Helm and Roesch-Marsh (2017).

However, while all participants discussed in some way the support they received from others, clear differences were observed regarding the participants' preferred sources of support. For instance, 13 Finnish participants stated that their colleagues, either their co-worker or members of their wider team, were their most important source of support for dealing with ethical issues; only one Finnish participant stated that they sought support from their manager first. In contrast, in England, only three participants referred to their colleagues as their most important source of support, while 10 participants stated that they approach their line manager for support in the first instance. This again highlights the recurring difference between the samples regarding managerial involvement in decisions. Examples of comments which illustrate this difference are presented below.

[M]aybe the most important support, where I get support, is my team and my co-workers. Because we can discuss our clients and their situations with our co-workers in the team. And they are always supportive and we are helping each other...

Finnish participant 12, municipality 2 (19 years' experience)

First of all, I would discuss with my working partner, and after this I would discuss with some other social worker, and I could also discuss with my manager. But first of all I think that we can handle most issues together with our, with other social workers, discussing this way. So we don't always need our manager's help.

Finnish participant 13, municipality 2 (6 years' experience)

[M]y first port of call would be my manager, you know, she'll always spare time for you if you're struggling with anything.

English participant 7, local authority 2 (2 years' experience)

[S]peaking to your manager. I, honestly, I'm not just saying this because I'm on tape, but I look forward to supervision because we really get to the nitty gritty, and we talk about: "What are the protective factors? What are the strengths we see in this family, what are the needs? What gut feelings have you had? Do they seem genuine, how can you evidence it?" ...and my manager will ask, have you thought? And I think, I'm embarrassed to say no, but that's why it's useful, isn't it?

English participant 11, local authority 3 (1 years' experience)

Although (as demonstrated in the above quotes) participants from the two samples appeared to prioritise different forms of support, 10 Finnish participants also made reference to the secondary support provided by their manager. Similarly, eight English participants discussed the support they received from their wider team, after speaking with their manager in the first instance. This was particularly apparent in local authority 2 which had implemented the systemic approach to practice, structured around small teams, as shown in the below quote:

*Managers, my practice manager is great and I don't feel that I can't go to her for any particular reason... So there's always that, the manager that we can go to...
[Also] I've got personally two other social workers in my little pod, as well as a*

social work assistant. And we're always talking about possible options we can go to with families, so that's really useful and helps us offload.

English participant 3, local authority 2 (3 years' experience)

A further difference noted between the samples was the fact that eight Finnish participants from different municipalities discussed the importance of 'supervision', by which they were referring to external supervision, provided to a team of social workers by an experienced social work professional based outside of their department or organisation. In contrast, when English participants discussed supervision, they tended to describe a form of one-to-one supervision provided by their direct line manager. There was one exception as one English participant referred to 'clinical supervision'; here, however, the inference was that this supervision was a form of therapeutic support, almost akin to workplace counselling. During this interview, the participant suggested that, in their view, supervision arrangements in their local authority were insufficient.

[E]very month we have in our working group, we have this outside professional who is helping us with dealing with the cases... Coming every month, and it's like, for everyone in the unit who is working. And that's the very good thing, it's almost four hours, we are sitting together and discussing about the cases.

Finnish participant 1, municipality 1 (8 years' experience)

[T]his team is gathering once in every two weeks, but if it is an urgent situation where a worker cannot wait anymore, there's always a possibility that she can

discuss with the co-worker... And once in a month, we also have this kind of group supervision where we can talk about these issues.

Finnish participant 7, municipality 2 (2 years' experience)

[Y]ou'd be having supervision [with your manager] monthly, at a minimum, because there's also informal supervision where you walk into your manager and say, "This happened today, I'm not happy about it".

English participant 14, local authority 1 (4 years' experience)

[My] manager is quite approachable, he would always give you some time, he's a very supportive manager, I'm quite lucky in that respect. But I do think you need better clinical supervision, I think there's a lack of that. I mean, you're able to access six hours every 12 months, outside clinical supervision, counselling or whatever you want to use it for. So I've used it once, but I think it may be useful to have 12, and maybe have one [hour] a month. Then you can use that space to explore. So apart from what I've just said, there's not that much support really. There's a lack of time to do that really reflective supervision in your workplace, I think it's really a problem.

English participant 9, local authority 1 (2 years' experience)

Alongside seeking support from managers, colleagues and supervisors, a minority of participants from England and Finland also stated that they handle ethical issues by discussing cases with multi-agency partners or through self-reliance. The exact nature of this self-reliance varied, but included personally reflecting on cases, the use of 'practice wisdom' and knowledge from past experiences, seeking out academic

research, or self-care, as presented below. No participants from either England or Finland stated that they used national or international codes of ethics to help them resolve ethical issues in their practice. This echoes the findings of research by Gough and Spencer (2014), Keinemans and Kanne (2013) and Rossiter et al. (2000), who similarly found that codes of ethics were rarely, if at all, referred to by social workers when they described processes for resolving ethical dilemmas.

[I]t's important to reflect on the situations and discuss about these situations, and be prepared with the other worker, the pair... And especially if there are, if there have been difficult situations and very demanding situations, more important is to reflect on this. Perhaps this is the most important way to deal with these issues in daily practice. But of course, every worker has their own ways to take care of herself or himself as a worker. And it's very important to take care of your own life, in order to do this quite hard work.

Finnish participant 14, municipality 3 (10 years' experience)

...I couldn't do the job if it wasn't for that support network here. And I think personally as well, it's really important that every social worker has their own personal let out, whether that's drinking alcohol or walking the dog or whatever, that social work needs to know how they can cope with their own emotions to the situation.

English participant 4, local authority 2 (2 years' experience)

Overall the participants' responses to this question highlight the crucial role played by support networks in helping social workers to make complex decisions and

manage ethical dilemmas in their practice. Significantly, the forms of support prioritised by the English and Finnish participants differed, with more English participants seeking ‘top-down’, managerial support in the first instance, compared to the more horizontal, team-based support preferred by the Finnish participants. However, the fact that a number of English participants from local authority 2 also discussed the role of support from colleagues within their ‘pod’ suggests that support structures may be influenced by organisations themselves, as well as by national-level influences.

6.3 Interview responses summary

In this chapter I have outlined key findings from the interview data, with various similarities and differences noted in the participants’ responses. Within and across organisations in both nations, similarities were noted in how new referrals were dealt with. In addition, organisational restructuring was mentioned by participants from every local authority and municipality, displaying the constantly changing workplace environment social workers from both contexts are required to work in. Differences related to working conditions were noted in some English local authorities, and there was a marked contrast between the two national samples surrounding who held decision-making authority. In particular, this concerned the professional discretion afforded to social workers, with the Finnish participants appearing to have more authority for case decisions compared to their English counterparts.

Importantly, the role of support was discussed in some form by every participant, demonstrating its central importance in child welfare and child protection

social work in both nations. However, differences between the samples were observed as the Finnish participants stated they received more support from co-workers and team colleagues, often within group supervision. This contrasted with the accounts of the English participants, who more often discussed the support and guidance they received from their line manager. This finding suggests that the Finnish participants may have had a wider network of support for making case decisions compared to the English participants.

Regarding ethical issues, dilemmas surrounding risk and uncertainty, and the challenges of upholding service users' rights when carrying out one's professional role, were repeatedly mentioned across both samples. This suggests that certain common ethical problems may be experienced by child protection social workers unrelated to the national context. While most of the English participants discussed ethical issues with reference to specific cases, this did not appear to influence the nature of the conflicts or the dilemmas they described when compared to the Finnish responses. One key difference was identified, however, as a third of the English participants described service availability and resource pressures as an ethical issue, while no Finnish participants mentioned this.

The themes and findings discussed in this chapter indicate that there are observable differences and similarities in how social workers in England and Finland make decisions and engage with ethics during this process. In the following chapter, the results of this analysis and the findings of chapter five are explored further in respect of existing literature and the research aims guiding this study.

Chapter Seven

Discussion

7.1 Introduction

The overall objective of this study was to investigate how child protection social workers in England and Finland make decisions and engage with ethics during the decision-making process. As outlined in chapter four, I examined this question through the device of case vignettes, which were used to recreate hypothetical decision scenarios. Participants were asked to respond to the vignettes and were then interviewed about their day-to-day practice experiences. This chapter draws on the results of this data, presented in chapters five and six, by connecting the results to themes derived through original analysis, before situating these findings alongside existing literature and theoretical debates.

In this chapter I begin by discussing key findings related to my first research aim: ‘to gain an understanding of how child protection social workers in England and Finland approach decision-making’. Here I explore the themes of *risk*, *procedure* and *support*, which were identified through a combination of analysis using the constructivist grounded theory method (Charmaz, 2014) and cross-sectional and non-cross-sectional qualitative analysis approaches (Mason, 2002), as discussed in chapter four. These three identified themes reveal the key drivers found to influence how participants in this study approach child protection decision-making. Specifically, in this discussion I examine the links between the participants’ interview responses and

established decision-making models, and consider the factors that affected the participants' decision-making at the individual, organisational and national levels. Within this discussion, I also incorporate findings relevant to research aims three and four: 'to compare data from England and Finland... to identify differences and/or similarities between the samples', and 'to reflect on possible explanations for any identified similarities and/or differences between the English and Finnish data'.

Following this, I go on to discuss key findings related to my second research aim: 'to gain an understanding of how child protection social workers in England and Finland engage with ethics'. Here, I explore the identified themes of *human rights*, *best interests* and *resources*, which reveal the three principal factors participants stated they were required to balance when faced with ethical dilemmas. In this section I consider the prevalence of 'ethics talk' and evidence of ethical engagement within the interview responses. I also discuss the specific types of the ethical issues encountered by the participants and the strategies they described for coping with everyday ethical conflicts. Again, I incorporate findings relevant to research aims three and four by comparing results from both samples, and considering possible explanations for the participants' observed ethical engagement, both drawing upon the literature and by exploring the relative influence of individual, organisational and national-level factors on participants' engagement.

To conclude the thesis, in chapter eight I go on to review the study overall and offer reflections on the process of and limitations of conducting comparative social work research. I then summarise the contribution of the study's findings, before

outlining the implications for social work practice, in England, Finland and elsewhere.

7.2 Comparing approaches to decision-making

Understanding how social workers approach and form decisions is a complex task, and as discussed in the methods chapter of this thesis, devices such as vignettes may not accurately tell us how individuals will react to a given scenario in a real-world setting. Despite this limitation, the results discussed in chapter five revealed a number of similarities and differences in how the participants responded to the two case vignettes. These results correspond with many existing findings within the literature, but also highlight features of child protection decision-making specifically related to the English and Finnish contexts; findings which emerged as a result of this study's comparative focus and design.

7.2.1 The role of the decision-maker

The results of this study demonstrate the importance of individual social workers in case decisions, as shown by the small differences observed within the participants' responses to the vignettes, both within agencies and across the two national samples. While many similarities were noted in the types of concerns identified, or in the additional information participants stated they needed to complete their assessments, differences were also observed, in particular related to the central theme of *risk*. In both samples, for example, some participants stated that children being removed

previously in the first vignette suggested there was a high level of risk; however, other participants reflected on the fact the family's situation may have changed, and so this information may no longer be significant. Therefore, regardless of their organisational context or national setting, some participants arrived at different risk calculations, despite being presented with the same case information.

The individual-level decision variation described above corresponds with existing debates on the importance of intuitive decision-making, however there was also evidence of analytical reasoning within many of the participants' responses. For example, in all interviews participants discussed the facts of the case and the evidence in front of them, while the majority of participants also referred to legislation, agency policy or the use of structured decision-making tools; references which may be viewed as evidence of technical-rational and analytical reasoning approaches (Munro, 2008). At the same time however, many participants also discussed similar cases they had dealt with previously, or commented on the difficulties of working with parental resistance when discussing the first vignette. Such comments appeared to relate directly to the participants' past experiences and may be seen as evidence of heuristics or bias in the participants' thinking (for example: "This parent appears to be resistant, therefore X response is needed"). As discussed in the literature review, such 'shortcuts' in thinking are indicative of intuitive or naturalistic reasoning approaches, and in particular, the participants' references to past cases may be seen as examples of 'recognition primed' decision-making (Klein, 1998; van de Luitgaarden, 2009). Although the participants had differing levels of professional experience to call upon, this did not appear to affect the use of intuitive reasoning; possible reasons

for this may be that recent cases were more present in the minds of newly qualified participants, or these participants were able to recall student placement or other work experiences to form judgments when assessing each scenario.

The presence of both analytical and intuitive reasoning within the interview responses indicates that the participants used a combination of the two decision-making approaches when considering the case vignettes. This finding supports extensive research evidence from within and outside of the social work discipline which has similarly identified the two contrasting modes of thought present in human decision-making (Hackett & Taylor, 2014; Kahneman, 2012; Munro, 2008; Platt & Turney, 2014; Thaler & Sunstein, 2009). Moreover, differences in the levels of risk identified by some of the participants suggest that these individuals had different ‘thresholds for action’ (Baumann et al., 2014); for example, a minority of the English participants recommended holding a strategy discussion in response to the second vignette, but most did not. According to the General Assessment and Decision-Making model, which can be related to the Decision-Making Ecology framework (Baumann et al., 2014), such differences in thresholds for action may be linked to personal triggers, and so may again be seen as evidence of the subjective ‘gut feeling’ responses associated with intuitive reasoning at the individual level. In view of the overarching themes of the thesis outlined in chapter one, this finding highlights the significance of individual-level factors, in particular, the role of personal experience and subjective risk thresholds as drivers of social work decision-making, irrespective of the national context.

7.2.2 The role of organisations

Decision-making and organisational processes

Though differences were noted in the participants' responses to the vignettes related to individual-cognitive factors, the results outlined in chapters five and six also clearly demonstrate the importance of organisational systems and agency processes in shaping the participants' deliberation and case recommendations. This finding links to the second theme which emerged during the data analysis: *procedure*. For example, several participants from both samples described similar procedures for dealing with new referrals, including having cases provisionally assessed by a central intake team. Additionally, when responding to the first vignette, almost half of the English participants and a third of the Finnish participants stated that the case may not reach their team, as due to the nature of the presenting issues, it was more likely the case would be screened out for early help/early intervention family support. There are a number of potential explanations for this shared response to the first vignette. On the one hand, the fact that these participants questioned whether the case would fall within their team's remit could reveal a proceduralised focus in their thinking, and in the context of high caseloads, such a response may be a logical strategy of self-preservation for social workers who are already working at full capacity and would struggle with further work. However, a small number of participants from both samples also questioned whether Kate, the mother in the first vignette, may be more receptive to early help support. Therefore, their question regarding whether the case had been correctly allocated may instead have been influenced by their professional judgement and assessment of how best to engage Kate, in light of her historical

involvement with social services and possible fear of social workers. A different perspective still may be that the vignette scenario simply did not reflect a typical child protection referral in either England or Finland. Although I purposefully designed the case to be ambiguous regarding the level of risk, the fact that many participants questioned the case's suitability could indicate that in practice, such cases may be filtered out by early help or preventative support services in both the English and Finnish contexts. On the basis of the interview data alone, it is difficult to determine the extent to which the participants' comments regarding the threshold of the first case vignette were shaped by organisational/procedural concerns, professional practice considerations or by the study design itself.

The significance of organisational procedures was more clearly observed in the participants' similar descriptions of referral screening processes. Potentially however, these similarities could be explained by policies within organisations *and* at the national level. For example, Sinko (2008) has suggested that the current Finnish child welfare assessment model, introduced following the Child Welfare Act 2007, was loosely based on England's *Framework for the Assessment of Children in Need and their Families* (Department of Health et al., 2000). Similarities in the initial assessment procedures described by participants could therefore support claims that there has been a convergence between English and Finnish child protection approaches in recent years (Gilbert, 2012; Gilbert et al., 2011a). Yet, in view of more recent analyses which have argued that England has moved back towards the child protection orientation as a consequence of cuts to preventative services since 2010 (Bunting et al., 2018), it may be that the observed similarities regarding assessment

processes relate to procedural matters alone and/or relate only to practice at the referral intake stage, and do not signify a more fundamental shift in the two national child protection systems. When this finding is considered in relation to the core themes and questions of the thesis, outlined in chapter one, the similar procedures for responding to new referrals described by participants suggest that organisational-level policies, as shaped by national legislation and legislative change, do seem to impact on individual social workers' initial decisions in both the English and Finnish contexts.

Organisational support for decision-making

Alongside similarities linked to the theme of *procedure*, a significant finding of this study was the fact that all participants reported that colleagues were involved in their practice decision-making to some extent. This highlights the crucial importance of the participants' workplace environments in both England and Finland, and demonstrates the influence that organisations and their staff can have on individual social workers' child protection decisions. This finding again corresponds with the Decision-Making Ecology framework (Baumann et al., 2014), as authors such as Helm and Roesch-Marsh (2017) have stressed the need for an 'ecological' model of judgement, which recognises the central role of teams, groups and organisational systems in social work decision-making.

References to the input of colleagues within the interviews provide a link to the third theme of this section of the analysis: *support*. As discussed, all of the participants stated that they received support from others when making case

decisions, a finding which underscores the collaborative nature of child protection decisions. However, clear differences between the English and Finnish samples were observed in *who* provided this decision-making support. In England, two-thirds of participants stated that they obtained support primarily from their manager, and over half of the English sample reported that they needed managerial authority for assessment decisions. In contrast, 13 of the 15 Finnish participants reported that they sought support from a co-worker or team colleagues in the first instance, and over two-thirds of the Finnish sample described joint-working arrangements, which they stated informed and influenced their decisions. Moreover, no Finnish participants reported that they needed managerial authority for everyday case decisions. This apparent inclination towards managerial support in England and team-based support in Finland echoes the findings of research conducted by Berrick et al. (2016b), who similarly explored the role of organisational structures in child protection decision-making through comparative analysis. Significantly, Berrick et al. (2016b) identified a predominance of vertical institutional support and low discretionary space in the English context, as compared to horizontal institutional support and greater discretionary space for decision-making in Finland. Such differences in professional discretion across the English and Finnish/Nordic contexts have also been identified in other studies, for example by Hearn et al. (2004) and Bradley and Höjer (2009), as discussed in chapters one and two. These findings also link to the debate within Munro's (2011) influential review of child protection in England, regarding the need for professional expertise to be valued and bureaucracy and audit processes reduced. The findings that have emerged from my own study suggest that individual social workers' expertise and judgement are clearly valued within the Finnish child

protection system, while English practice still appears to be driven to a greater extent by top-down accountability procedures. According to Parton (2014a), growing scrutiny and managerial control have been particular features of child protection policy and practice in England since the death of Maria Colwell in 1973. My findings help to demonstrate how this wider context of child protection policy appears to be affecting the way individual social workers in England and Finland approach their decisions, and who they choose to go to for decision-making support.

The fact that my own study reinforces these earlier findings is significant for a number of reasons. First, it has been claimed that increased managerialism and reduced discretion in English social work has led to a situation of deskilling and deprofessionalisation (Rogowski, 2012). Additionally, as managers can have different priorities to that of social workers, such as case management or budget targets, it has been argued that “professional judgement [may be] increasingly bound up with, and subordinated to, managerial imperatives concerning corporate objectives and resource control” (Clarke, 1996, p. 58). Empirical research on social work supervision in England also appears to support such claims; for example in a study by Wilkins, Forrester, and Grant (2017, p. 942) it was observed that social work supervision seemed to operate “*primarily as a mechanism for management oversight* and provided limited opportunity for reflection, emotional support or critical thinking” (emphasis added).

As the English participants in this study reported lower levels of discretion and greater managerial oversight, it could be inferred that their professional capacity for deliberation may be lower than their Finnish counterparts, as their decisions may

be influenced to a greater degree by management priorities. The results of this study do not support these conclusions fully, however, as many of the English participants provided thoughtful and nuanced interview responses, demonstrating a high level of deliberative ability and concern for service users' needs and wishes. Instead, my findings more closely support the view of Evans and Harris (2004), who, citing Lipsky (1980), have suggested that despite increased managerialism in English public services in recent years, social workers may still apply recognisable 'street-level' discretion in their everyday practice. While this may be the case, the fact that the Finnish participants reported higher levels of discretion is still relevant in view of research which has shown that high workload demands, combined with low decision-making control, can lead to increased work stress, burnout and poorer staff retention (Wilberforce et al., 2014). In the context of these findings, it is relevant to note that turnover and vacancy rates for social workers are higher in England compared to Finland (Department for Education, 2017d; National Institute for Health and Welfare, 2017). It is therefore possible that increased demand for services in England (Department for Education, 2017a) combined with the lower levels of professional discretion, as identified in this study, may be contributory factors in these higher turnover rates.

A second point of discussion concerning the different forms of support sought across the English and Finnish samples relates to the size and availability of the participants' support networks. In the Finnish sample, participants described how they could consult their co-worker, their wider team and manager when needed, and could also discuss cases in regular group supervision, coordinated by an independent,

external supervisor. In contrast, the English participants reported that they discussed cases predominantly with their line manager and often with colleagues, but had no access to external group supervision. These results are relevant in view of research evidence, discussed in the literature review, which suggests that having a forum to discuss cases with colleagues can assist decision-making and ethical reflection (Goldman & Foldy, 2015; Munro & Hubbard, 2011; Rossiter et al., 2000). For example, in Munro and Hubbard's (2011, p. 734) research review it was found that having "time... a forum for reflective practice and a culture that promotes it" was seen by practitioners as vital for effective decision-making. Similarly, in Bradley and Höjer's (2009, p. 81) exploration of supervision in the English and Swedish contexts, it was reported that group supervision in Sweden provided the social workers with "an independence of thought and vision that they perceive is good for their morale and their developing competence". Furthermore, in a recent study in England by Wilkins and Antonopoulou (2018), the minority of social workers who reported receiving group supervision were also more likely to find supervision helpful in 'practice-related' ways, compared to those who only reported receiving one-to-one supervision from their line manager.

Therefore, it would appear that having access to reflective group supervision, rather than task-based managerial supervision alone, provides social workers with a wider network of colleagues with whom they can regularly discuss cases and seek advice. This in turn may provide social workers with the space and opportunity to analyse the full complexity of their caseload, and could potentially improve deliberative ability while increasing confidence in decisions, if a social worker feels

all angles of a case have been reflected upon. Indeed, it may be for this reason that in research by Berrick et al (2016b), the English social workers were observed as less confident in their case decisions when compared to the Finnish practitioners. In view of this lack of confidence, strategies such as seeking out managerial approval or ‘upwards delegation’ to managers (Whittaker, 2011) may be used by English social workers as tools for shifting accountability, particularly in defensive workplace environments. Based on the results of this study, it is unclear whether strategies such as upwards delegation were actively being used by the English participants, or whether the participants were simply adhering to organisational and national policies which required that their work be checked by a manager (HM Government, 2015). Regardless however, it is possible that the more limited support network reported by many of the English participants may be impacting on practice in ways this study alone has been unable to determine. This highlights one potential area for future research, as will be discussed further in the concluding chapter.

While there were clear differences between the English and Finnish samples in terms of the participants’ primary sources of support, it should be noted that two-thirds of the English participants also mentioned the support they received from team colleagues, secondary to the support provided by their manager. This was particularly apparent in local authority 2, which had implemented a systemic approach to practice based around small teams or ‘pods’. For example, one participant from local authority 2 stated: “I absolutely could not do my job without my pod”, a statement which demonstrates the clear importance of the pod support network to that individual. Such comments may suggest that, although overall the English sample seemed to have

more limited access to team-based support, due to the smaller team structures in local authority 2, support from colleagues was more accessible to this particular group of participants. Similar findings have been noted in other studies of systemic practice units, including the evaluation by Forrester et al. (2013, p. 184), which concluded that overall, “smaller teams work better”. It should be noted however that the systemic unit-approach adopted in the English context has been structured around a high ratio of supervisors to social work staff (Forrester et al., 2013, p. 184), meaning that the ‘pod’ system described by the participants in local authority 2 may still mirror a system of vertical, supervised institutional support. Linking these observations back to the research aims for this study, these findings highlight important differences in how child protection social workers seem to approach decision-making within the English and Finnish contexts, and again the findings help to demonstrate how structures within organisations can impact on the support-seeking behaviours of individuals during the decision-making process.

A final observation surrounding the apparent dominance of manager-led support in the English sample, contrasted with team-led support in Finland, is the fact that the English social workers in this study clearly valued the support and input of their managers. For example, one English participant described how they could get to the “nitty gritty” of cases during supervision with their manager, suggesting that the supervisory experience was positive and provided a constructive space for case reflection. While the benefits and problems associated with managerial influence on case decisions remain subject to debate, as discussed by Munro (2011), the results of this study revealed that the majority of the English participants appreciated the

support they received. As such, the fact that only one Finnish participant reported that they sought advice from their manager in the first instance could reveal a possible lack of access to this form of supervisory support within the Finnish context. Additionally, another Finnish participant stated: “Sometimes it’s difficult to reach our manager because she’s so busy all the time”. It should be noted that this comment was an exception however, and no other Finnish participants in the study reported difficulties in accessing support from their manager. Nevertheless, the comparatively limited role and involvement of managers in support provision in Finland is another area that could benefit from additional research. In particular, it may be useful to explore the extent to which wider cultural influences, such as the possible legacy of a more deferential class system in England, compared to a more equal social structure in Finland, could be embedded within organisational systems and support structures, as well as national policies, across the two nations.

Organisational structures and the national context

The above discussion has highlighted key differences between the English and Finnish contexts linked to organisational factors; notably, the relationship between social workers and their managers, as well as joint-working and supervision arrangements. The fact that these differences were observed between the two samples, however, indicates that the workplace systems present in the English and Finnish sites must have been shaped in some way by national-level factors. Meeuwisse and Swärd (2007) have discussed the complex interconnections between practice at the individual, organisational and national levels, and my own

observations around case authorisation and professional discretion provide a useful example of this scalar interplay. For example, while the English local authorities in this study had adopted policies to limit practitioner discretion, including requiring managerial authority for case decisions, it is possible these policies may only have been imposed due to guidance at the national level. As discussed in chapter five, the statutory child protection guidance in place in England at the time of the interviews stated that a child's social worker should: "decide the nature and level of the child's needs and the level of risk [and] *The social work manager should challenge the social worker's assumptions as part of this process*" (HM Government, 2015c, p. 24, emphasis added). This 'challenge' could be seen in the requirement for managerial case authorisation imposed by local authorities. By contrast, Sections 26 and 27 of Finland's Child Welfare Act 2007 make clear that the social worker has full case responsibility, with no mention of managerial challenge or other managerial involvement. Therefore, it is perhaps unsurprising that different arrangements for case oversight were observed in the English and Finnish interview responses due to this difference in policy and guidance at the national level.

Alongside policy and legislation, the external social and political climate in England and Finland may also have influenced organisational practices, as well as how the participants responded to the interviews and approached the vignettes in this study. For example, as discussed in chapter three, child protection practice in England has been heavily affected by media and political coverage of high profile child protection cases, such as the death of Peter Connelly in 2007 (Parton, 2014a). Indeed, this specific case was directly referred to by some of the English participants in this

study, which highlights how present the case still is in the participants' minds, several years later. One of the recommendations of England's Social Work Task Force (2009), set up partly in response to the 'Baby Peter' case, was improved supervision for social workers. Though the report makes some reference to employers providing opportunities for peer support, the report's authors place the primary responsibility for supervision on managers, who are also expected to assess social workers' competency: "Through supervision, social workers review their practice and deal with the challenges and stresses arising from their work; and managers can get to understand the current capabilities of the practitioner, helping them in turn to allocate cases appropriately" (Social Work Task Force, 2009, p. 31). Therefore, the legacy of this national recommendation, combined with a more risk-averse mood within many local authorities in response to cases such as that of Peter Connelly (Parton, 2014a), may help to explain why so many of the English participants in this study reported seeking decision-making support from their manager first, either informally or through case supervision. The continued role of managers in case decisions, as underscored by the report of the Social Work Task Force (2009) and revised statutory guidance (HM Government, 2010; 2013; 2015), helps to demonstrate how the wider policy context can affect the decision-making behaviours of individual practitioners. Moreover, within an environment of increased scrutiny, and amid threats that "failing children's services in local authorities will be taken over" (Prime Minister's Office, 2015), local authorities across England have developed additional accountability practices to defend both themselves and their staff (Webb, 2006). This shift appears to have impacted on individual social workers in England, who have been reported as feeling increasingly unconfident about their practice (Berrick et al., 2016b), and as

shown in this study, more likely to seek managerial input and advice, likely as a result.

While high profile child protection cases have also sparked media interest in Finland in recent years (Forsberg & Ritala-Koskinen, 2010), such cases have not had the same impact on national and organisational policy as in England. Although there has been some policy response to the recent ‘illfare’ debate in Finnish culture, including “different development programmes and projects, started at different levels, justifying themselves as prevention or reaction measures to children’s illfare” (Forsberg & Ritala-Koskinen, 2010, p. 61), there has not yet been clear evidence of a shift in policy or legislation concerning the day-to-day work processes of child welfare social workers in reaction to such debates. Rather, the most significant national reform in recent years, LAPE, has instead attempted to strengthen preventative support options for children and families and assist coordination between professionals (Ministry of Social Affairs and Health, 2016). One explanation for why substantial national-level changes to local work processes have not yet been implemented may be connected to the relative strength of Talentia, the Professional Union of Social Workers in Finland, which actively campaigns to promote the interests of the social work profession (Talentia, n.d.), and may act to challenge any such changes judged by the Union to be inimical to good social work practice. Moreover, research studies from business and management disciplines indicate that Finnish organisational cultures are generally less individualistic and less hierarchical, compared to nations such as the UK (Hofstede Insights, 2017). This wider cultural attitude may again help to explain why the Finnish participants in this study described

more horizontal, team-based support provision, with less ‘top-down’ management involvement in decision-making imposed by their organisations.

7.2.3 Risk judgements and the national context

As discussed above, national-level factors including national policy and legislation, and social and political cultures, could help to explain some of the observed differences in the interview responses provided by the English and Finnish participants in this study. A further example of this may be seen in the different levels of emphasis placed on particular risk factors across the two samples. For example, when discussing the second case vignette, all of the English participants referred to the online relationship involving Sam, and two-thirds of the sample identified the risk of child sexual exploitation. In contrast, in Finland, only one participant directly discussed the risk of grooming, with most participants appearing to consider the case a matter of online bullying. Additionally, four Finnish participants did not mention the online relationship at all. This finding is significant as it highlights the different perceptions of risk participants from the two countries ascribed to the same situation. The fact there was such a clear difference between the samples suggests that this discrepancy must have been related to the participants’ national practice environments.

In England, child sexual exploitation has become a significant cause for concern nationally following several high profile cases of systematic grooming and abuse (Jay, 2014; Oxfordshire Safeguarding Children Board, 2015). This has resulted in the publication of national guidance on the issue (Department for Education,

2017b), and many local authorities have developed additional procedures and systems, such as the use of structured ‘CSE’ risk assessment tools (by way of example, see Greenwich Safeguarding Children Board, 2015). Indeed, the use of such tools was discussed by English participants in this study; one English participant explained that in their local authority, a social workers’ professional opinion could be overruled if a child scores above a certain threshold on their agency’s CSE tool; a situation which demonstrates the high level of concern held about child sexual exploitation within that agency. In contrast, none of the Finnish participants mentioned such tools, or referred to the use of any structured decision-making systems within their organisation. Due to the heightened focus on child sexual exploitation in England both nationally and locally, it is perhaps understandable that so many of the English participants identified the risk of exploitation when discussing the second case vignette. Their decision-making was likely to have been shaped both by organisational factors, such as the introduction of new guidance or assessment tools, as well as by individual cognitive mechanisms, such as the availability heuristic (Kirkman & Melrose, 2014), given the increased frequency of references to child sexual exploitation in public media debates. Although the risk of child sexual exploitation has also become more prevalent in Finland in recent years (Save the Children Finland, 2016), this has not yet resulted in the same emphasis in policy, research or media debates. Evidence for this can be seen in statistics collated for the European Union’s Safer Internet Programme, which show that the number of studies concerning online sexual abuse published in England up to 2010/2011 was almost nine times greater than in Finland during the same period (Ainsaar & Loof, 2011, p. 23).

While concerns surrounding the risk of child sexual exploitation were more common in the English participants' responses, when discussing the second vignette, 14 out of the 15 Finnish participants stated that Sam's suicide ideation was their greatest concern. The Finnish participants were also more likely to comment on Sam's emotional needs surrounding his identity and sexuality, and how these pressures may be impacting on his mental health. The fact that within the Finnish sample the risk of suicide was seen as a higher priority than the risk of child sexual exploitation may similarly be related to the national context, given figures which show that suicide rates among young people in Finland are among the highest in the world (Lahti, Räsänen, Riala, Keränen, & Hakko, 2011; Wasserman, Cheng, & Jiang, 2005). National programmes aimed at suicide prevention have also been introduced in Finland (Korkeila, 2013), which may have further reinforced awareness of the issue in the minds of the Finnish participants. This finding is significant as it demonstrates how social concerns at the national level appear to have affected the views of the participants in this study, and consequently, influenced their risk perceptions and decision-making processes when discussing the vignettes. Linking this finding back to study's research aims and the overall focus of the thesis, outlined in chapter one, this finding reveals important differences in how the English and Finnish social workers approached their decisions as a consequence of their national environment. Differences in the participants' sensitivities to particular risk factors could be seen as a clear example of how the wider national context, and national child protection policies and discourses, are interacting with practices within organisations and with the personal judgements and risk thresholds of individual social workers.

Overall, the findings discussed above highlight the complex interrelationship between various influences on the English and Finnish participants' judgement and decision-making, acting simultaneously at the micro, meso and macro levels. In particular, the results reveal that the participants' decisions were shaped by individual-level factors, including past experiences and personal biases, as well as agency processes and support provision, national policy and legislation, and national risk debates; findings which support the conclusions of Keddell's (2014) research review, which similarly identified a multitude of factors that contribute to decision variability in child welfare social work. As references to the themes of *risk*, *procedure* and *support* were so common throughout the interviews, across both samples, this suggests that these three factors were key influences upon the participants' decision reasoning in both national contexts.

7.3 Comparing ethical engagement

As discussed in the literature review chapter, relatively few empirical studies of social work ethics have been published in recent years, despite an increased prevalence of theoretical texts on the subject (Banks, 2008). As such, there is limited empirical evidence concerning how social workers think about and use ethical ideas and concepts in their everyday practice, and even less is known about how social workers engage with ethics from a comparative perspective. In carrying out this study I have attempted to respond to this apparent gap in the research literature, and the results of this investigation are outlined below. The key themes of *human rights*, *best interests* and *resources* are discussed; however the earlier themes of *risk*, *procedure*

and *support*, discussed in the previous sections, are also referred to given their applicability to the participants' responses concerning both ethical engagement and decision-making.

7.3.1 Risk, procedure and ethics

As discussed in chapter five, an important finding of this study was the fact that participants' engagement with ethical issues appeared to vary between individuals when discussing the case vignettes. Overall, however, across both national samples participants largely focused their discussion on risk factors over ethical issues when responding to each case. When formulating the interview questions for this study, I purposefully chose not to ask the participants about ethics or similar concepts until the end of the interview; this was because I wanted to explore if and how the participants referred to ethical concepts when discussing the case vignettes without first being prompted. Therefore, the fact that the participants' responses were dominated by references to risk and procedure, while the ethical features of each case were not always discussed, was a notable finding and one which corresponds with a number of studies that have similarly identified a dominant risk focus in contemporary child protection social work (Stalker, 2003; Wilkins, 2015).

Regarding the ethical issues that were discussed, in relation to the first vignette, the most common issue mentioned by almost two-thirds of the English participants was the fact that Anna, the educational welfare officer, had not informed Kate that she had made a referral to social services. One English participant, for

example, stated: “I think it’s a bit concerning that the school hasn’t actually shared with Kate their concerns, or been more open and honest about the referral that they’ve made”. Other participants simply stated that they would ask Anna to speak to Kate about the referral, without the use of ethically-orientated language such as the need to be ‘honest’. This observation echoes the findings of Banks and Williams’ (2005) study, in which the authors noted a similar difference in the language and use of ‘ethics talk’ by individual professionals, with some articulating situations using explicitly ethical terminology, while others used more general terms but still inferred a sense of ethical awareness. Perhaps significantly, the issue of Anna making the referral to social services without first informing Kate was mentioned by only two of the 15 Finnish participants, compared to two-thirds of the English participants. This in itself may not suggest that the Finnish participants were relatively unconcerned about the apparent breach of Kate’s privacy, but instead may reflect the fact that Finland operates a system of mandatory reporting, whereby relevant professionals have:

...a duty to notify the municipal body responsible for social services without delay and *notwithstanding confidentiality provisions* if, in the course of their work, they discover that there is a child for whom it is necessary to investigate the need for child welfare... (Section 25, Child Welfare Act 2007, emphasis added).

Therefore, because current legislation in Finland obliges professionals to make a notification to social services when deemed necessary, regardless of any duties of confidentiality, the Finnish participants may not have viewed Anna’s referral as an

ethically complex issue. In contrast, England does not operate such a system of mandatory reporting, and though the duty to report concerns was strengthened under the Children Act 2004, current statutory guidance requires that professionals:

Be open and honest with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so. (HM Government, 2018a, p. 4).

As the excerpt above demonstrates, national statutory guidance in England includes a greater requirement for professionals to inform individuals before sharing their information. This example indicates that the particular ethical sensitivities of the participants in this study, like their assessments of risk, appear to have been influenced by the wider context of child protection policy in both nations, including national legislation and practice guidance, and possibly broader cultural beliefs about the role of the state and the extent to which it should be permitted to intervene in private family life (Fox Harding, 1997). As was discussed in chapter three, historically there has been a high level of trust between families and the state in Finland, where it has been seen as normal for families to “expect state help and to trust social workers” (Blomberg et al., 2010, p. 34). This more trusting cultural context, as compared to England, could help to explain why fewer Finnish participants commented on Kate’s information being shared without her knowledge or raised this as a potential ethical issue.

Alongside the issue of Anna making the referral without Kate’s knowledge, a minority of participants from both samples also discussed the dilemma of working

with Kate seemingly against her wishes, thus undermining her right to self-determination. These participants discussed possible reasons for Kate's lack of engagement, including her past history with social services, and weighed these explanations against the need to find out more about the family's situation. Here there was a difference in the approach of some participants. Some appeared to be more mindful of Kate's wishes and feelings, as several participants from both samples recognised that Kate may be fearful of social workers, and so a greater level of sensitivity and compassion would be needed to improve their relationship; in many ways resembling the ethic of care philosophy (Gilligan, 1982; Tronto, 1993). For example, one Finnish participant stated: "is she [Kate] afraid of the same process starting all over again and she's going to lose these children also? So there are certainly valid concerns with the mother..." Other participants, however, seemed to be less sympathetic to Kate's apparent resistance and more accepting of their professional role and duty to protect Daniel and Emily. For instance, one English participant stated: "Obviously mum's not keen to have a support plan through school, so she doesn't sound like she'd be happy to have social care involved, but that's just how it is, isn't it?". Such comments suggest there was variation in the nature and extent of ethical reflection undertaken by different individuals, a finding which corresponds with research discussed in the literature review, including studies by Banks and Williams (2005); Freymond et al. (2013); Landau (1999) and Landau and Osmo (2003), who each identified differences in how individual practitioners interpret ethical situations. Here, Sarah Banks' (2016, p. 35) concept of 'ethics work', that is, "the effort people put into seeing ethically salient aspects of situations", is particularly relevant. The results of this study revealed that a number participants

across both samples identified more ethical issues in the case vignettes than others; it could therefore be inferred that these participants may have engaged in a higher level of ‘ethics work’ when considering the case scenarios. This finding displays the complexity of ethical engagement as a process, and the driving forces behind this. On the one hand, participants appeared to be influenced strongly by individual-level factors, as irrespective of the national or organisational context, some participants identified more ethical issues, and spoke about ethical issues to a greater extent than others. However, in relation to the specific *types* of issues identified across the samples, as the example of confidentiality and information sharing displays, this *did* appear to be influenced to some degree by national-level factors, including national policy and potentially the broader cultural values held within the English and Finnish cultural contexts.

Regarding the second case vignette, the most common ethical issue discussed in both samples was the matter of whether Sam’s parents should be informed about the referral, against Sam’s wishes. This was discussed by eight of the English participants and six of the Finnish participants. In both samples, participants reasoned that Sam’s parents would need to be informed to allow them to keep Sam safe online. However, in order to respect Sam’s wishes as far as possible, one Finnish participant discussed omitting certain details of the referral when speaking with Sam’s parents, and another five Finnish participants stated that they would tell the parents but would speak with Sam about the matter first, in order to reassure him. Fewer English participants stated that they would speak with Sam first, and some described difficulties related to agency procedures, which required prior parental consent in

order to meet and speak with a child. While many of the English participants recognised the ethical dilemma, the fact that more of the Finnish participants chose to prioritise their contact with Sam could potentially be connected to a growing emphasis on children's rights in Finland, a subject also discussed by Pösö (2011). Indeed, the recent programme of national child welfare reform in Finland, LAPE, cites "the child's rights and the child's interest" as one of the core principles guiding the reform programme (Ministry of Social Affairs and Health, 2016, p. 4). Therefore, the more explicit consideration of Sam's wishes among the Finnish participants could again be evidence of the wider contextual environment - specifically, national-level debates on children's rights - impacting on individual social workers' processes of ethical reasoning and decision-making.

The above ethical issues within the vignettes were discussed by many of the English and Finnish participants, but not all, as some participants focused their discussion solely on presenting risk factors and procedural matters. Another observation from the data was the fact that participants from both samples were more able to articulate specific ethical issues later in the interview, when I directly asked participants to describe the ethical dilemmas social workers experienced in their country. Two key findings may be drawn from these observations. First, the different levels of ethical reflection or 'ethics work' (Banks, 2016) identified within the responses could suggest that individual social workers engage with ethics to different extents, as a consequence of wider contextual as well as personal factors. This should be seen as a tentative finding, however, as it is important to recognise that social workers may reflect on referral situations in different ways; simply because an

individual did not verbally discuss a particular ethical issue within an interview context does not conclusively prove they did not identify it or reflect on it internally. Despite this, the fact that references to risk and procedure were much more prevalent within the vignette discussions could suggest that current practice in both England and Finland, *at least in responding to initial referrals*, resembles elements of the child protection-orientated/risk-orientated child welfare model, given its greater emphasis on investigation and risk identification (Burns et al., 2016b; Gilbert et al., 2011a). This finding would appear to support claims of convergence between the English and Finnish child protection systems (Gilbert, 2012), at least at this initial stage of the child protection process. Furthermore, the relative absence of ‘ethics talk’ from the vignette discussions could support claims made by Featherstone et al. (2014), regarding the growing absence of explicit ethical debate in child protection policy and practice, despite the significant intrusion into family life associated with this area of social work.

7.3.2 Ethics, human rights and children’s best interests

When responding to the vignettes, observable differences were identified in how individual participants discussed and engaged with ethical issues within the two cases. However, when asked directly about the ethical issues social workers experience in child protection work, a key finding of this study was the broad commonality in responses across the English and Finnish samples. Although there was again some variation at an individual level, responses to this question in general were more focused and more closely related to traditional ethical concepts, with more

explicit examples of ‘ethics talk’ (Banks & Williams, 2005). This finding, which relates to the second research aim of the study, suggests that the English and Finnish social workers appeared to recognise and experience a number of similar ethical challenges in their everyday work.

Across both samples, the most common ethical dilemmas described by participants related to the central themes of *human rights* and *best interests*; themes which emerged clearly from the analysis of this particular section of the interview data. Specifically, participants’ accounts focused on the challenges of balancing, on the one hand, a child or parent’s right to self-determination, privacy and family life, with the child’s long-term best interests, including the child’s right to safety and healthy development. An example includes a comment from one English participant who highlighted the difficulty of balancing children’s needs with those of their parents: “[Y]ou’re working with parents, and a lot of times they’re victims themselves. So you’ve got a dual role, you’ve got to protect the child, but at the same time you’ve got to support and enhance the parents’ everyday life.” The fact that such issues were discussed across both samples suggests that this particular dilemma of balancing service users’ human rights, specifically the right to self-determination, and children’s best interests, is experienced by social workers in both national contexts, and individual social workers seem to be affected by the dilemma in similar ways. My findings in this regard support existing research which has similarly noted that social workers encounter many of the same ethical dilemmas identified in this study. In research by McAuliffe and Sudbery (2005), for example, Australian social workers reported that the most common ethical issues they encountered related to situations

where their professional responsibilities (namely, to protect children) conflicted with service users' human rights. Similarly, Freymond et al. (2013) found that among a sample of Canadian social workers, their main ethical priority was ensuring the child's safety; comments which bear resemblance to many of the responses in this study, regarding the paramount need to protect children's welfare and best interests.

Although the most common ethical issues discussed by participants related to human rights and best interests, a minority of participants also made reference to issues such as confidentiality and maintaining professional boundaries. The issue of professional boundaries seemed to be more prevalent in the Finnish context, possibly due to the country's smaller population density and the greater likelihood that a social worker may be known by service users in their community. However, the fact that these issues were referred to less frequently overall suggests that the participants may have attributed less importance to these 'secondary' ethical issues. Here, my findings correlate with existing debates regarding the existence of ethical hierarchies in social work practice (Harrington & Dolgoff, 2008; Landau & Osmo, 2003), including the suggestion that social workers tend to prioritise certain core ethical principles, such as protection of life, above more qualified principles, such as truthfulness or confidentiality. Additionally, the fact that the participants prioritised the long-term best interests/outcomes for children above all else suggests that both the English and Finnish participants favoured consequentialist ethical perspectives, whether they were consciously aware of this or not. This finding again corresponds with existing debates which suggest that social workers tend to favour consequentialist ethical arguments when making real-world decisions (O'Sullivan, 2011; Osmo & Landau, 2006). As

discussed by O'Sullivan (2011), this tendency may be a feature of children's social work in particular due to the legal principle which states that a child's welfare must be the paramount consideration. This 'paramountcy' principle is present in both England's Children Act 1989 and Finland's Child Welfare Act 2007, and so one explanation for why the participants held shared ethical beliefs in this regard could be because of the similar legal frameworks underpinning their practice. Moreover, although none of the participants explicitly referred to their national professional codes of ethics during the interviews, it is relevant to note similarities across the national codes regarding the issue of children's welfare and best interests. For example, the HCPC's standards of proficiency state that social workers must "understand the need to *promote the best interests of service users* and... the need to protect, safeguard, promote and prioritise the wellbeing of children, young people and vulnerable adults" (Health and Care Professions Council, 2017, p. 6). Similarly, the BASW code of ethics states that social workers should "respect, uphold and defend each person's... well-being [and] work towards *promoting the best interests of individuals*" (British Association of Social Workers, 2014, p. 6). Likewise, the Talentia ethical guidelines⁴ make clear that: "Ethically, the work of the social worker is based on defending the client's rights and *ensuring the client's best interests*" (Talentia, 2007, p. 14). These excerpts (with emphasis added) demonstrate that the core ethical principle of protecting service users' well-being and best interests is evident across professional codes in both England and Finland. Therefore, the fact that participants adhered to the provisions of their national codes during their

⁴ The Talentia (2007) ethical guidelines cited above were in place at the time the interviews with the Finnish participants were conducted. It should be noted that these guidelines were updated in 2017 (Talentia, 2017), however at present no English translations of the updated ethical guidelines have been published.

interviews, even if this was not directly acknowledged, could arguably be seen as a further example of the interplay between individual professional approaches, and how these approaches are influenced by broader macro-/national-level contextual factors.

7.3.3 Resources and ethical stress

When asked about the ethical issues participants experienced in their work, as discussed above, broad similarities were noted between the samples in the frequency and nature of comments relating to human rights and children's best interests. However, some observable differences between the samples emerged surrounding the theme of *resources*. Within the English sample, a third of participants described ethical situations they had experienced directly as a result of limited resources. For instance, two English participants from different local authorities described how they had to "fight really hard" or had "battled" with management in order to obtain certain services for families. In contrast, none of the Finnish participants mentioned resources when describing the ethical issues they had encountered.

One explanation for this difference may be that there is simply more investment in child welfare services per capita in Finland, and therefore greater service availability when compared to the English context. This explanation may be supported by the results discussed in chapter six; when participants in this study were asked about the services available to families to prevent children from being taken into care, there were over twice as many references to support services in the Finnish responses (89), as compared to the English sample (40). In part, this difference may be related to the fact that Section 36 of Finland's Child Welfare Act 2007 enshrines

within it a list of specific services that must be made available to children and families in need through ‘open care’ measures. In contrast, Section 17 of England’s Children Act 1989 only requires that local authorities provide “a range and level of services appropriate to those children’s needs”, meaning there is no obligation for any *specific* services to be provided.

Ethical issues related to resource constraints have been discussed in previous studies, such as the study by Papadaki and Papadaki (2008), which described some of the moral challenges observed in Greek social work organisations connected to resource pressures. Research has similarly identified the presence of moral distress among Finnish social workers, that is, “work-related malaise that develops when a social worker cannot practice in a morally appropriate way”, as a consequence of insufficient resources (Mänttari-van der Kuip, 2016, p. 86). In an earlier study, Mänttari-van der Kuip (2014, p. 680) noted that “respondents whose work included child protection duties experienced impaired work-related well-being significantly more frequently [than non-child protection social workers]”; suggesting that resource constraints and workload pressures may be a particular feature of child protection social work in Finland. In view of Mänttari-van der Kuip’s (2014; 2016) findings, and other reports which have discussed the growing resource pressures impacting on children’s services in Finland (Yle, 2014), it is perhaps surprising that none of the Finnish participants in this study mentioned any ethical dilemmas caused by resource issues. Possible explanations for this may be that the Finnish participants in this study considered that ethical dilemmas related to human rights and best interests were more significant, or alternatively, that the separation of social workers’ duties following

implementation of the Social Welfare Act 2014 may have masked, to some extent, cuts to certain services in Finland for these particular participants.

Another factor which may have contributed to the English participants making more references to resource constraints could be that they potentially felt more comfortable criticising government and agency approaches when compared to the Finnish participants. Literature surrounding professional identity has discussed how certain groups, such as social workers, may develop and share ‘atrocity stories’ in order to defend themselves against illegitimate claims (Dingwall, 1977; Morriss, 2015). Therefore, given the more hostile view of social workers in the English context, as discussed previously by Warner (2014), it may be that some of the English participants had developed certain narratives to protect themselves from criticism, including claims of chronic underfunding. The results of this study do not necessarily support this suggestion, as it was evident in a number of the English participants’ accounts that they were deeply and personally affected by dilemmas they had faced related to resource pressures. In particular, two participants described real cases where they believed a service user had been let down, and from these accounts it appeared that the participants had experienced genuine ethical distress. For example, one participant described how they had felt “horrificed” and “helpless” about the lack of mental health support available to a young person they had worked with, who in their view had fallen between the “gap” in adult and children’s social care provision.

A final explanation for the above difference concerning resource pressures may be that the English participants shared these politically sensitive accounts due to our similar backgrounds, since I also have experience of working in an English child

protection team, and so in their view, could have been able to personally relate to their experiences. In contrast, the Finnish participants may have sensed that they were acting as representatives of their country and profession when talking to an ‘outsider’ researcher from England. As such, it is possible that the Finnish participants may have been more reluctant to discredit their government or employer’s approach when speaking with me, as compared to if they had been speaking with a fellow Finnish social worker as part of a single-country study. As discussed in the methodology chapter of this thesis, in addition to my ‘outsider’ status as a non-Finnish national, the fact that I conducted most of the Finnish interviews through interpreters may have added a further layer of formality to the interview interaction, which again could have reduced the frankness and openness of some of the Finnish responses. Another explanation still may be that the Finnish participants were less willing to criticise organisational and national funding decisions due to the relatively high level of public trust in state institutions in Finland, when compared to other national contexts (Kettunen, 2010; Primožič & Bavec, 2009). Although it was not possible to identify the exact cause of the more numerous reports of resource related-stress among the English sample, the clear difference across the expressed views of the social workers in the two countries highlights that the contextual environment seemed to be having some impact on the participants’ reports of, and potentially experiences of ethical stress in practice. In relation to the overall focus of the thesis and the key themes outlined in chapter one, this could be evidence that national-level factors were influential in contributing to some of the ethical issues encountered by the social workers in this study.

7.3.4 Support for ethical decision-making

A final key finding concerning the participants' discussions surrounding ethical issues relates to their reliance on other individuals when responding to and managing ethical dilemmas in practice. Just as participants described the support they received from colleagues when making case decisions (see section 7.2.2), all participants from both samples stated that other individuals, whether they be work partners, team members, managers, external supervisors or multi-agency colleagues, helped them with their ethical problems in some way. This finding demonstrates the clear importance of support networks in ethically complex work environments, including within child protection social work. This finding also corresponds with previous empirical studies that have highlighted the vital importance of ethical support in social work practice. This includes a survey of Canadian social workers conducted by Gough and Spencer (2014, p. 29), in which the majority of respondents cited "consultation with colleagues and supervisors," when asked how they address ethical conflicts in their work. Similarly, a survey of Israeli social workers conducted by Linzer et al. (2003) showed that the respondents most commonly managed ethical dilemmas by consulting with colleagues. Given these findings, alongside my own observations, it may be argued that there is a need for more debate on the role and importance of group decision-making processes in the theoretical literature on social work ethics. For example, Dolgoff, Harrington, and Loewenberg's (2012, p. 85) text on ethical decision-making encouraged individual social workers to reflect upon and identify their own personal hierarchy of ethical principles, in order to make more

considered decisions. While this in itself may be beneficial for individual social workers, arguably this approach does not place sufficient emphasis on the reality of how social workers resolve ethical dilemmas in practice: by seeking advice from their peers. In view of known biases such as ‘group think’ (Janis, 1972), which have been shown to influence the quality of decisions, this may be an important omission in the current theoretical literature on social work ethics.

In addition to the support provided by others, a third of the English participants and two Finnish participants described other strategies they relied upon for dealing with ethical issues, including personal reflection, followed by self-care and consulting research evidence. Significantly, no participants from either sample stated that they used ethical codes to assist them when responding to dilemmas, a finding which could support the view of those who have suggested that codes can be ambiguous and of little practical value for resolving ethical dilemmas in practice (Harris, 1994). It has not been possible to identify from this study alone, however, whether national ethical codes may in fact still aid ethical reflection indirectly, by supplementing and consolidating practitioners’ broader ethical knowledge and awareness.

A further observation from the results is the fact that almost two-thirds of the English participants described real cases (without revealing service users’ identities) when discussing the ethical issues they encountered, as compared to only two Finnish participants. It is unclear from the data why so many of the English participants referred to past cases, and there did not appear to be any association with the participants’ age or years of experience. Potentially, this difference may be because

the Finnish social workers were more able to discuss ethical issues in the abstract, possibly due to their longer University education. An alternative explanation may be that the English social workers were more emotionally affected by the cases they discussed, which is why they chose to 'open up' and express in detail the ethical issues they had encountered when working with these individuals. Connected to this, the interview interaction itself may have provided a chance for the participants to reflect upon their work and think through past cases with an independent person; an opportunity the English participants may not usually have had access to, given the absence of external supervision arrangements in most local authorities. The assertion here that the English participants referred to past cases more frequently due to unresolved ethical stress could help to explain the findings of wider research on turnover and vacancy rates in English child protection social work. As discussed in section 7.2.2, current statistics indicate that turnover rates are higher among English social workers as compared to their Finnish counterparts. The broader context of resource pressures and reduced preventative support for families in England (see section 7.3.3), combined with greater public pressure on social workers (Parton, 2014a), may have contributed to this difference in turnover rate. Once again, this could be seen as an example of the national context influencing the ethical issues encountered by social workers and, given the smaller support networks available to English practitioners, as noted in this study, impacting on practitioners' opportunities for ethical reflection and engagement.

Overall, the results of this study have revealed several key findings which may contribute to the developing field of empirical ethics in social work research.

First, when presented with the hypothetical referral scenarios, both the English and Finnish participants' discussions tended to focus on matters of risk and procedure, suggesting that ethical deliberation was not a foremost consideration for most participants. Yet, when asked directly about the ethical issues encountered by child protection social workers, participants from both samples described complex dilemmas related to balancing human rights, self-determination and children's best interests, and less frequently, discrimination and professional conduct. This could suggest that internationally, or at least within Western European countries such as England and Finland, social workers may experience similar ethical challenges in this specific area of practice. The results also indicate that the participants rarely resolve ethical issues on their own, but instead seek decision-making support from colleagues and managers. Arguably, this shared approach to resolving dilemmas has been neglected in much of the theoretical literature on social work ethics. Furthermore, notable differences were observed between the samples as more English participants reported ethical issues related to resource pressures, and a greater number of English participants related their accounts of ethical issues to real cases. As discussed, this difference may point to a higher level of ethical stress among English social workers, and be evidence of the national contextual environment impacting on and influencing ethical pressures, and social workers' responses, at the practice level. In view of the limited cross-national research in this area, this finding suggests that further comparative research on this topic could be beneficial.

7.4 Summary

This chapter has discussed key findings from the study related to how child protection social workers in England and Finland approach decision-making and engage with ethics during the decision-making process. The results connect with many existing theoretical debates and findings from the research literature, but also reveal new understandings of how social workers manage the complexities of child protection work in different national contexts.

In particular, the results have highlighted the multiple, interrelated factors that influence practitioner decision-making. The participants' accounts revealed how their conceptions of risk were influenced by agency and national procedures, as well as national public debates and individual cognitive factors. Decisions were then mediated through the support of others, notably managers and team colleagues. In the English context, managerial support for decision-making was found to dominate, likely as a result of the more hierarchical accountability structures and defensive decision-making cultures present in the English context. Yet, the English participants clearly valued the support provided by their managers, and this finding connects to an ongoing debate around whether managerial scrutiny is appropriate, or has gone too far within the English context. In July 2018, the UK government amended the core statutory guidance relating to child protection in England: *Working Together to Safeguard Children* (HM Government, 2018b). An important change to the guidance included the removal of the requirement for managers to be involved in deciding the speed with which assessments should take place, thereby granting more discretion to individual social workers. While this change may be viewed as in keeping with the recommendations of the Munro Review (2011), in particular, regarding the need to

value social workers' expertise while reducing bureaucracy and micro-management, many within the social work profession in England have raised concerns about the changes. In response to a government consultation on the updated guidance, BASW stated that members were "vehemently opposed" to the decision to remove managerial involvement in case progression, "given that managers are crucial in terms of accountability and shared responsibility" (British Association of Social Workers, 2017). This continued debate regarding practitioner discretion, alongside the results of this study, suggest that more research is needed to determine the benefits and disadvantages, and the optimum balance of managerial involvement in case decisions. Moreover, the fact that only one Finnish participant stated that they sought support from their manager in the first instance suggests that further research into whether Finnish social workers could benefit from greater managerial input could also be constructive.

In addition to the above, the results of this study have shown that English social workers appear to have smaller networks of support for case decisions when compared to Finnish practitioners. As such, research into the potential benefits of extending support networks, for example, through more co-working arrangements or increased group supervision, could provide new insights. Theoretically at least, increasing opportunities for case analysis through greater use of group discussion, and creating a forum to share ethical problems with colleagues, could improve both the quality of case decisions and may help to reduce social workers' experiences of isolation and ethical stress. The reorganisation of some English child protection teams into systemic units, such as in local authority 2 in this study, suggests that such

changes are not unattainable, may not involve prohibitive costs, and could bring significant practice benefits. Indeed, growing evidence regarding the benefits of systemic practice has inspired pilot studies in some Finnish municipalities (Fagerström & Karvinen-Niinikoski, 2013). This finding of the study therefore has direct relevance to and implications for current social work practice, and will be discussed further in the concluding chapter.

This chapter has additionally explored how the English and Finnish participants in this study engaged with ethics when making case decisions. Analysis of responses to the two case vignettes suggests that in general, participants from both samples tended to engage with the ethical features of the cases less often than the potential risk factors. As there did not appear to be any national-level difference between the samples in this regard, this finding suggests that current practice in responding to referrals in *both* England and Finland is predominantly risk/child protection-orientated, in contrast to suggestions that Finland operates a largely family service-orientated child welfare system. To some extent, this finding could support Neil Gilbert's (2012) claim that there has been a recent convergence in practice approaches in many child protection systems, including in England and Finland. However, as other researchers have identified continued differences between English and Finnish approaches to child welfare (Burns et al., 2016b), my study's results could instead indicate that the shared risk-focus is limited to the *referral and assessment stage* of the child protection system only, possibly because, as suggested by Sinko (2008), Finland's current child protection assessment framework was loosely based on English policy (Department of Health et al., 2000).

Additionally, comparative analysis of the participants' descriptions of ethical issues revealed many similarities in how the English and Finnish participants experienced ethical dilemmas. Common ethical problems related to balancing children's and parents' right to self-determination with children's best interests, and consequentialist ethical rationales, appeared to dominate in the responses. As so few comparative empirical studies have been conducted in the field of social work ethics, further research could expand on this finding to explore whether, as a profession, social workers internationally think about ethics and prioritise certain core ethical principles in similar ways. As this study was conducted in two relatively affluent European countries, research in more diverse contexts could reveal further insights.

Finally, the results discussed in section 7.3.4 of this chapter indicate that the English participants experienced greater ethical stress in their work due to resource pressures and a relative lack of support services for children and their families. This finding would suggest that, *in terms of support provision*, Finland's child welfare system continues to resemble the more preventative-focused family service model, while England's system remains more reactive, high threshold and child protection-orientated. The fact that Finland's system appears to be such a hybrid, with elements of the family service-orientation, risk/child protection-orientation and the child-focused-orientation, could reveal the limited application of the original 'orientations' framework proposed by Gilbert (1997). As such, further comparative research on child welfare/protection systems could provide new and beneficial perspectives. Additionally, further research on ethical stress in child protection social work, again from a comparative perspective, could help to improve understanding of the factors

that give rise to ethical stress in different national contexts, and what options may be available to alleviate such stress. Crucially, this research must attend to the challenges of conducting comparative analysis related to translation and researcher positionality, as discussed earlier in the methodology chapter.

In summary, this chapter has outlined key findings of the study and has explored a range of explanations for apparent differences, similarities and trends within the data. I have related these findings back to the research aims of the study and the discussion has situated the findings alongside existing empirical literature and research debates. In the concluding chapter of the thesis, I go on to review the contribution of the study overall and consider its unique contribution to existing research, its implications for social work practice, and opportunities to build on the study's findings and conclusions.

Chapter Eight

Conclusion

8.1 Introduction

In this thesis I have explored the question of how child protection social workers approach decision-making and engage with ethics through a comparative research design. This methodological approach provided the means to compare practice in two European nations, Finland and England, and allowed me to identify similarities, as well as some notable differences in practice, which I have argued highlight the critical influence of context on social workers' processes of decision-making and ethical engagement. In particular, I have argued that the national context appears to influence how support structures for decision-making are organised within child welfare agencies. These support structures seem to be vital in helping social workers to negotiate the complexities of every day child protection decisions, particularly when assessing risk, adhering to procedures and when balancing families' human rights with children's best interests, often in the context of scarce resources. Through my analysis I have argued that having access to strong support networks may assist in promoting ethical reflection when forming decisions, while helping to mitigate ethical stress.

8.2 Review of the chapters

In chapter two, the literature review, I explored empirical research related to social work decision-making and ethics, and comparative studies centred on child protection in the two research nations. I suggested that, while a growing body of research has examined cognitive processes of decision-making in social work, there is relatively limited evidence concerning how social workers understand and conceptualise ethics in practice, and even less is known about how social workers engage with ethics in different national contexts. In chapter three I examined the policy and practice contexts of the two research nations in more depth, and assessed the conventional view surrounding the ascribed ‘orientations’ of the two nations’ child welfare systems; namely, the suggestion that England’s system is largely characterised by the risk-focused child protection orientation, while Finland’s system resembles the prevention-focused family service orientation, as suggested in Gilbert’s (1997) original analysis.

In chapter four, the methods chapter, I explained the rationale for my qualitative research design based on interviews, and my use of the vignette device. This specific approach was chosen in order to examine how social workers respond to and form decisions when presented with hypothetical cases, while the open interview questions, asked following the vignette discussion, provided the space for participants to describe and articulate their personal decision-making approach and understanding of ethical issues in practice. Chapters five and six then reported on the findings of the data. In chapter five I outlined the participants’ responses to the case vignettes, including observed differences in the prioritisation of certain risk factors across the two samples. Chapter six detailed the participants’ responses to the interview

questions and revealed differences in the participants' descriptions of how work is organised in the English and Finnish contexts, as well as differences in the sources of support sought by participants when faced with complex decisions. Finally, in chapter seven I discussed key themes from the data connected to my research aims. Here, the themes of *risk*, *procedure* and *support* were highlighted as crucial for understanding how participants across both samples approached their decisions. The additional themes of *human rights*, *best interests* and *resources* were discussed less frequently overall within the responses, but helped to shed light on how the participants thought about ethical issues and dilemmas within their practice.

In this concluding chapter of the thesis, I reflect on the challenges of conducting comparative research and the limitations of this particular study. I then outline the study's substantive contribution to knowledge and go on to discuss its implications for social work practice and policy.

8.3 Reflections and limitations

8.3.1 Reflections on the research process

A fundamental problem when undertaking any comparative study of child welfare systems relates to internal research validity, and the challenge of establishing “whether two things that appear the same are really the same; and whether two things that seem different are really different” (Hetherington, 2002, p. 14). A further challenge, particularly faced by researchers who compare different national systems with their own, is the question of how one's assumptions and personal perspectives,

shaped by social and cultural heritage, impact on processes of analysis when comparing data. When I first began this study in 2015, five years into the UK Conservative government's austerity programme, I held a critical view of many aspects of current child protection policy in England. I knew less about child protection in Finland, but had pre-existing notions of a more comprehensive and better resourced social democratic welfare support structure in the country. I was aware that such ideas could lead me to identify aspects of Finland's child welfare system that supported my existing beliefs, and so I endeavoured to use self-reflection to challenge my assumptions throughout the research process. For example, in my discussion in chapter seven, I have reflected on different explanations for the relatively frank disclosures of my English participants when discussing resource pressures, in comparison to my Finnish participants. I have also reflected at length on my observations regarding managerial input into case decision-making. On the one hand, my finding that the English participants had more 'top-down' support and less discretion in their work could suggest they had fewer opportunities for case deliberation and ethical reflection. A contrasting view may be that the absence of managerial input in Finland could indicate a deficiency of management-level support for social workers in this context. Therefore, by considering a range of possible explanations for my findings I have attempted to reduce the potential for inaccurate or overstated conclusions.

Another limitation of this study and similar small-scale qualitative analyses relates to external research validity; that is, the extent to which findings from a study may be generalised to different situations and contexts. As my sample included just

15 social workers from each comparison nation, I cannot claim that my results are representative of how all social workers in England and Finland may act, or that my results may be applicable to other national contexts. However, as discussed in chapter four, in carrying out this study it was essential that I selected a research approach that would reveal the depth and complexity of my participants' personal understanding of ethical concepts, and I judged that this depth could only be achieved through a qualitative research design. Additionally, while my conclusions cannot be directly generalised to other contexts, many of my results support the findings of previous empirical studies. For example, my participants' varied responses to the case vignettes revealed evidence of intuitive and analytical reasoning, which accords with much of the existing literature on social work decision-making (see Hackett & Taylor, 2014; Munro, 2008; Platt & Turney, 2014). The fact that my results affirm these findings helps to support the reliability of my work, in spite of the small-scale research design.

One of the most significant challenges I faced when undertaking this study, linked to its comparative design, related to language and the fact that I was dependent upon translators during most of my Finnish interviews, which is likely to have affected this data set to some degree. Additionally, I was unable to include research literature and policy documents published in Finnish in my analysis. Although some key areas of policy and legislation have been translated from Finnish to English, such as Finland's Child Welfare Act 2007 (Ministry of Social Affairs and Health, 2007), I was unable to access the organisational materials and local policy documents that guided the work of my Finnish participants. Most English local authorities publish

their child protection procedures online; therefore, had I been able to access equivalent municipality documentation in Finland, I would have been able to compare, for example, agencies' case authorisation procedures and agency guidance on case supervision. Such documents could have added to my contextual understanding and allowed me to learn more about how organisational policies may have shaped my participants' decision-reasoning, ethical narratives and understanding.

A further challenge I experienced concerned the fact that national and local policy and practice can change, and this change can be difficult to capture within a cross-sectional research design (Hämäläinen, 2014). In particular, changes to England's core child protection guidance introduced in 2018 (HM Government, 2018b), and the 2016-2018 reform programme around child and family services in Finland, known as LAPE, have altered the child protection landscape in both nations since I began this project in 2015. The changes introduced in England are particularly relevant to this study as the removal of the requirement for managers to oversee case progression timescales could indicate an important shift in policy direction towards increased discretion and autonomy for social workers. Within this thesis I have highlighted concerns raised by some authors (see Clarke, 1996 and Rogowski, 2012) regarding the rise of managerialism in English social work, and the negative impact this may have on social workers' analytical skills, reflective abilities and professional status. Concerns about the lack of value placed on social workers' expertise were also highlighted in Munro's (2011) review of child protection, commissioned by the UK government. Indeed, within the interview data for this study, there appeared to be an

often uncritical acceptance among many of the English participants that managers must ‘sign off’ case decisions, which demonstrates how embedded management oversight is within the English system. As such, it is unclear what impact the recent changes to *Working Together to Safeguard Children* (HM Government, 2018b) will have in practice. As discussed in chapter seven, the professional association BASW has fiercely opposed the recent changes to the statutory guidance (British Association of Social Workers, 2017). One possible explanation for this may be that management oversight and case audit trails are still preferred by local authorities, and social workers themselves, because the factors that have given rise to defensive decision-making cultures (such as underfunding for local authorities and political and media criticism) are still very present in England’s child protection system.

In Finland, the changes introduced through the recent ‘programme to address reform in child and family services’ (LAPE) can be seen in the context of the wider health and social care reform agenda in Finland (SOTE), which has sought to restructure service provision through the creation of larger administrative districts. Specifically, the LAPE reforms have aimed to reduce spending on more costly, ‘remedial’ services, including child removal, by investing in preventative provision, and crucially, by establishing more integrated support through the low threshold ‘family centre’ operating model (Ministry of Social Affairs and Health, 2016). Such family centres will bring together a network of services, including welfare clinics, family work and early childhood education services, and are being established in 18 regions across Finland (Ministry of Social Affairs and Health, 2017). Achieving a change in ‘operating culture’ has also been an explicit aim of the LAPE reform

programme. A particularly relevant aspect of this for this study includes the proposal that: “Municipalities, counties and State authorities [will] receive tools for decision-making based on knowledge and children’s rights and for promoting the operating culture” (Ministry of Social Affairs and Health, 2016, p. 5). However as the LAPE reforms are still being implemented, it is unclear what the changes in ‘operating culture’ and decision-making processes will mean in practice, though it is likely that social workers will be expected to work even more closely with partner agencies. Moreover, the future direction of the wider reform programme to health and social care in Finland remains uncertain, following the resignation of the centre-right coalition government in March 2019 for failing to push the SOTE reforms through Parliament (BBC News, 2019).

Despite this uncertainty, the growing interplay between the use of the Social Welfare Act 2014 and Child Welfare Act 2007 in the provision of services, and the promise of increased low threshold preventative support under LAPE, may be seen evidence of a continued commitment to the family service model in Finland, even if motivated in part by financial justifications, including a desire to reduce the number and cost of children entering state care, a trend which has been increasing in Finland since the mid-1990s (Pösö & Huhtanen, 2016). Finland’s approach in this regard can be seen in contrast to that adopted in England in recent years, where funding for preventative services has been cut, while growing numbers of children are being taken into state care (Department for Education, 2017c; Kelly et al., 2018).

Policy and practice in both England and Finland are therefore continuing to move forward, and I believe that, rather than making the results of this study

obsolete, the changes highlight the ongoing relevance of debates around practitioner discretion and the availability of preventative family support measures in child protection, both of which, as this study has shown, can impact on social workers' processes of decision-making and ethical engagement.

8.3.2 Reflections on the research aims and findings

The central research problem guiding this study was the question of how child protection social workers in England and Finland approach decisions and engage with ethics. This question was exploratory in nature, as my intention was not to seek conclusive answers but to gain a broader understanding of the processes surrounding decision-making and ethical engagement in the two comparison nations, and to reflect on the possible factors influencing these processes. As part of this, I sought to explore the relative influence of, and interplay between individual, organisational and national-level factors acting on these processes, and I developed four research aims (see chapter four) to assist me in my investigation these issues. In the following section I reflect on these four research aims and reconsider them in light of literature reviewed in the thesis and the original findings of the empirical study.

In relation to the first research aim, ('to gain an understanding of how child protection social workers in England and Finland approach decision-making'), when beginning the study I was aware of differing approaches to welfare in England and Finland, and expected that these differences would reveal themselves in child welfare policy and social workers' practice decisions as a result. I speculated that national

legislation and policy would be influential in shaping decision-making approaches, due to the effect on local organisational procedures and individuals' work tasks. On reflection, it is possible that my assumption that decision-making approaches would be impacted so strongly by national and organisational procedures could have been related to my own experiences as a somewhat unconfident newly qualified social worker. It is possible that I unconsciously used 'procedural adherence' (Whittaker, 2011) as a form of social defence myself, and so expected that procedures would impact on others' practice in the same way.

After undertaking the literature review, comparative studies such as that Hearn et al. (2004) and Berrick et al. (2016), which noted differences in the decision-making discretion afforded to English and Finnish social workers due to national-level influences, largely confirmed my expectations concerning the impact of contextual factors on social workers' practice. This research and similar studies also supported my view that decisions would be impacted by accountability structures and managerialism more strongly within the English context. I therefore began my data collection anticipating contrasting decision-making approaches across the two national samples. After completing my data collection and analysis, however, I was struck by many of the similarities in the participants' responses, particularly in relation to the procedures they described for responding to new referrals. As regards the differences I identified, I did not anticipate such clear national differences in participants' responses to risk issues when discussing the vignettes; this suggested to me that the contextual environment appeared to play a key role in shaping risk narratives and attitudes, which then affected individuals' decision judgements.

Moreover, I was struck by just how significant organisational structures seemed to be in shaping the decision-making support available to the participants. This finding emphasised for me that child protection decision-making is a largely collective rather than individual activity, and that as such, organisations can play an active role in shaping the balance between ‘supervised’ and ‘supported’ approaches to decision-making (Falconer & Shardlow, 2018). The implications of these specific findings are discussed further in section 8.4.1, below.

In relation to my second research aim, (‘to gain an understanding of how child protection social workers in England and Finland engage with ethics’), before starting the study, it appeared from personal experience that child protection social workers did not tend to talk about or discuss ethical issues openly within everyday practice. It was unclear to me however whether this observation was accurate or related to my own experiences only, or whether this apparent lack of ethical discussion was a feature of English child protection social work more widely, or was a phenomenon evident in other national contexts. When I then searched for existing comparative research on social work ethics and ethical approaches, I found little available evidence, and it so remained unclear how the national environment affected social workers’ engagement with ethics when making decisions.

The findings of the empirical study revealed that the nature and level of ethical engagement varied between participants, with no clear national or organisational pattern. This suggested that the activity of ethical engagement by individual social workers was largely shaped by individual-level, rather than organisational or national-level factors. However, the finding that support networks

could be so important for guiding decision-making, alongside the finding that participants sought the support of others when faced with difficult ethical choices, emphasised for me the potential of organisational support structures in helping to promote a more ethically reflective work culture. Moreover, although national codes of ethics were not mentioned by the participants in this study, it is possible that similarities in the English and Finnish national codes could have influenced the participants' tacit ethical knowledge, and their prioritisation of children's best interests as a core ethical principle as a result. Therefore, national professional associations and bodies, such as Talentia, BASW and Social Work England⁵, could potentially play a more active role in promoting conscious ethical reflection and engagement among their individual members and registrants.

Regarding the third research aim of the study ('to compare data from England and Finland in respect of aims 1 and 2, to identify if there are similarities and/or differences between the samples'), as discussed above, before beginning the research I was conscious of differences in English and Finnish approaches to welfare and social policy, and anticipated that these differences would have affected the development of the two nations' national child protection systems. Comparative studies which had identified contrasting national approaches to child protection in Europe (Gilbert 1997; Hetherington et al. 1997) supported my assumptions, however I was intrigued to find more recent studies which reported a possible convergence in national approaches to child welfare, including in England and Finland (Gilbert 2012; Gilbert et al. 2011b).

⁵ As a result of the Children and Social Work Act 2017, Social Work England will take over the regulation of social workers in England from the Health and Care Professions Council in December 2019 (Social Work England, 2019).

After undertaking the data collection and analysis for this study, the similarities and differences identified suggested that the reality of child protection policy and practice within the two nations is highly complex. In a number of respects the English and Finnish child protection systems are very similar, such as in relation to the paramountcy of children's welfare in legislation, the emphasis on working with other agencies, and initial assessment processes for new child welfare referrals. As discussed in chapter seven, elements of these assessment processes may have converged because, as discussed by Sinko (2008), aspects of Finland's Child Welfare Act 2007 concerning assessment were "loosely based on the English Framework for the Assessment of Children in Need and their Families". Potentially, this commonality in assessment approaches may have contributed to the shared risk focus identified within many of the English and Finnish participants' accounts, when discussing the vignettes. Yet, it also became clear when undertaking this study that many differences remain between the two nations' broader approaches to child welfare and protection. For example, in chapters six and seven I discussed the finding that the Finnish participants made more than twice the number of references to support services for children and families, as compared with the English participants. This suggests that Finland's system overall is still largely characterised by the preventative, 'family service' approach to child welfare, based on accessible universal and targeted support provision for families. In England, despite greater investment in support services during the late 1990s and 2000s, the national system, as delivered through local authorities, still resembles the more reactive, high-threshold 'child protection' orientation (Parton, 2014b). Indeed, the depiction of England's system as child protection-orientated has only intensified since 2010 as a

consequence of funding cuts to preventative services for children and their families (Kelly et al., 2018). Therefore, due to both the identified similarities and persistent differences across the two systems, I concluded that it is difficult to characterise the English and Finnish national approaches overall within a single comparative typology or framework.

Finally, in relation to the fourth research aim ('to reflect on possible explanations for any identified similarities and/or differences between the English and Finnish data'), I believe that the similarities and differences discussed above underline the multifaceted and dynamic nature of national child protection systems, and the complex interaction between these national systems and organisational and individual-level drivers in shaping everyday practice. For instance, while some practice approaches may adapt and transfer across national boundaries relatively quickly, it seems from my findings that the broader cultural drivers that influence the wider context of policy and practice in England and Finland (for example, societal attitudes towards welfare, and the level of support families should receive from the state), appear to be more enduring and slow to change. This insight about broader cultural drivers could help to explain why certain procedural elements of the English and Finnish child protection systems have converged in recent years, and why some aspects social work decision-making in the two contexts, such as the participants' shared risk focus when responding to new referrals, appear to be broadly similar. However, fundamental cultural differences between the two national systems remain, and it is clear from my findings that these wider contextual differences are impacting on the everyday lived experiences of the participants in this study. For example, the

reduced availability of early help and support for families in England, combined with a legislative framework which permits the permanent and non-consensual removal of children, within an environment of increased agency scrutiny and performance monitoring of social workers, could help to explain the comparatively higher levels of ethical stress identified among the English participants in this study. I argue that evidence such as this, which illustrates how national child protection systems can be subject to embedded cultural and political forces, demonstrates the continued relevance and importance of comparative social work research for ‘shining a light’ on national systems and for promoting ongoing critical reflection and debate.

In the following section of this chapter I reflect on these various issues further, and discuss the overall contribution of the study and specific implications for social work policy, practice and future research.

8.4 Contribution of the study

In chapter seven of the thesis I discussed how, through undertaking the literature review and conducting the data collection and analysis, I had addressed the four research aims guiding the study. Within this chapter I also highlighted six key themes that had developed through the data analysis. Specifically, I highlighted how the themes of *risk*, *procedure*, *support*, *human rights*, *best interests* and *resources* were recurring and significant features of the interview responses, and this provided important information about the factors influencing decision-making and ethical

engagement across the two research sites. From this, three substantive contributions to knowledge have emerged from the research study overall:

- First, the findings have developed theoretical and empirical debates on the subject of social work decision-making, specifically by highlighting the vital role of support networks in shaping practice decisions, and the role of national and organisational factors in influencing the structure and form of these support networks.
- Second, findings concerning the participants' responses to the vignettes have revealed that both the English and Finnish participants tended to focus on presenting risk factors over the ethical aspects of the cases. This suggests that, *at the point of referral*, a predominant risk-focus may exist in both contexts. This finding challenges prevailing narratives relating to national child protection systems, with the English and Finnish systems often characterised as child protection/risk-orientated and family service-orientated respectively (Burns et al., 2016b; Gilbert, 1997). This finding also raises important questions about the relative lack of ethical focus at this early stage of the child protection process.
- Third, this study has provided new insights into how social workers conceptualise and engage with ethical issues from a comparative perspective. As discussed in chapter two of this thesis, there has been an absence of comparative focus in empirical studies of social work ethics, despite an

awareness that ethical perspectives in social work can vary internationally (Banks & Nøhr, 2012; Hugman, 2012). The findings of this study, including the shared ranking of core ethical principles by the English and Finnish participants, and the ethical sensitivities displayed in the participants' responses to the vignettes, provide useful contributions to the growing field of empirical ethics in contemporary social work research.

In the section below I expand on each of these contributions before outlining the implications for future policy and practice.

8.4.1 The role of support networks in shaping decisions

This study has highlighted the central importance of contextual factors in child protection decision-making in support of the growing body of research on Decision-Making Ecology theory and the General Assessment and Decision-Making Model in social work (Baumann et al., 2014; Fluke, Baumann, Dalglish, & Kern, 2014; Helm & Roesch-Marsh, 2017). Baumann and colleagues have argued that organisational and external factors, such as changes to policy and legislation, can influence individuals' risk thresholds and ultimate practice decisions. Certainly, in this study the English participants' heightened concerns surrounding child sexual exploitation, set in the context of newly introduced CSE policies in England, may be viewed as evidence in support of Decision-Making Ecology theory. When beginning this research project such contextual differences at the national level were of particular interest given this study's comparative focus. However, what emerged inductively

from the data was the strong interaction between national approaches to child protection and practices at the organisational and individual level.

As discussed in chapter seven, some of the clearest differences across the English and Finnish interviews related to support provision and the role of managers in case decisions, both of which were shaped by the participants' organisational contexts. For example, the data revealed notable differences in the support networks available to participants across the two samples. In England, participants stated that they relied primarily on their managers for decision-making support, followed by team colleagues, while in Finland participants sought support from co-workers and team colleagues in the first instance. The fact that support provision appeared to be largely hierarchical in England, and more horizontal in Finland, led me to conceptualise this difference through the concepts of 'supervised' and 'supported' judgement (see also Falconer & Shardlow, 2018). Here, supervised judgement describes a situation where social workers rely mainly on 'top-down' managerial input to guide decisions (as in England), while supported judgement describes a more collective decision-making approach, where social workers utilise support from a range of sources, including input from co-workers, team colleagues, managers and external supervisors (as in Finland). I have argued that this difference may have implications for the decision-making discretion afforded to English social workers, since English practitioners may be reluctant to contradict decision advice given to them by their direct line manager. Additionally, the smaller support networks available to social workers in England may help to explain why a greater number of the English participants reported experiences of ethical stress; potentially, this stress

may be related to feeling unsupported when dealing with complex ethical dilemmas. In Finland, where participants reported working in pairs with other social workers or *sosionomi* on cases, and discussed having access to regular, independent group supervision, it may be inferred that the participants had more opportunities to discuss the complexities of cases and receive decision-making advice and support.

Other comparative studies have noted similar differences in the discretion afforded to social workers in England and Finland (Berrick et al., 2016b; Gilbert, 1997; Hearn et al., 2004). However, the findings of this study have revealed how organisational structures and management decisions surrounding, for example, co-working arrangements and access to external supervision, appear to influence whether a culture of ‘supervised’ or ‘supported’ judgement dominates. That co-working and external supervision were more prevalent in Finland, and present across all three municipalities, suggests that these working arrangements were influenced by national-level factors. However, the fact that team support was also mentioned by several participants from local authority 2 in England, which had implemented a systemic approach to practice, based around small teams, suggests that organisations have the capacity to adjust internal working arrangements to promote supported judgement and team-based support, irrespective of the national context.

8.4.2 Risk prioritisation and ethical engagement

One of the primary motivations for undertaking this research was to explore whether social workers in different national contexts engage with ethics in different ways.

Social workers around the world are guided by an international statement of ethical principles (International Federation of Social Workers, 2018), the contents of which have been integrated into many national codes of ethics, including codes in England and Finland. However, social workers globally operate in different welfare and legal contexts, where the types of issues faced by children and their families, and the resources and powers available to social workers to tackle these issues, can vary considerably. When beginning this research I therefore speculated on whether working in a context with greater state investment in child welfare, and lower social inequality, may afford social workers more time and opportunity for ethical reflection.

The results of this study have revealed little overall difference in how the English and Finnish participants approached the vignettes and engaged with the ethical issues within the cases. While all 30 participants across the samples identified risk factors in the two cases, the ethical aspects of the vignettes - such as questions around social justice and discrimination, service user confidentiality and self-determination - were not mentioned at all in three of the English interviews and six of the Finnish interviews. In chapter seven I discussed possible reasons for this, such as the policy of mandatory reporting in Finland, which could explain why fewer Finnish participants discussed the matter of Kate's information being shared without her knowledge in the first vignette. However, the fact that nine participants across the samples did not mention *any* ethical issues, while all discussed risk factors, suggests that overall there was a predominant risk-focus in the participants' thinking when they approached the cases.

In some ways this risk focus may be logical when workers do not know the family in question and are attempting to assess whether urgent intervention may be required with limited information. This risk-focus is exemplified in one comment from an English participant in this study, who stated, when responding to the first vignette, “I always look at things from a safeguarding perspective first”. The secondary focus on ethics, however, raises important questions concerning our knowledge of how contemporary child welfare systems operate and how social workers currently approach cases at the point of referral. As discussed previously, much of the comparative literature on child welfare in England and Finland has referred to the seminal child protection typology developed by Neil Gilbert and colleagues (Gilbert, 1997), which categorised England’s system and Finland’s system as child protection-oriented and family service-orientated respectively. More recently, Burns et al. (2016b) built on Gilbert’s typology and differentiated between risk-orientated and service-orientated systems, again placing England and Finland in different categories. As regards how the social workers in this study approached the vignettes, as discussed, participants from both samples focused primarily on the risk factors in both cases. This signifies a shared risk-orientation across the two contexts, at least when analysing information *at the point of referral*. The reason I make this distinction is because once risks are identified and cases are progressed, it is possible that social workers in England and Finland then approach cases differently, and more in accordance with the established ‘orientations’ framework, as summarised below:

In risk-orientated systems, there are high barriers for interference in the private [family] sphere; thus these systems have high thresholds for

intervention. In service orientated systems, the aims are to promote healthy childhoods and as well as mitigate serious risks, with an emphasis on the prevention of harm. (Burns et al., 2016b, p. 5)

Therefore in England, social workers analysing referrals may look for risk with the aim of intervening only when absolutely necessary, and then filter out or pass on cases that do not meet their agency's threshold for intervention. In Finland, social workers may look for risk with the dual aims of intervening to reduce harm, or alternatively, intervening to offer preventative support when there are lower-level concerns, for example, by providing support under the Social Welfare Act 2014. The fact that the Finnish participants in this study made significantly more references to support services for families, when compared to the English participants, helps to support this interpretation.

The participants' secondary focus on ethics when discussing the vignettes also suggests that, despite a proliferation of professional ethical codes in recent years, in practice, social workers may not always explicitly integrate ethical reflection into their decision-making at the point of referral. This absence of ethical engagement did not appear to be uniform however, as some participants offered thoughtful reflections on various ethical issues within the vignette scenarios. It is unclear from the results whether the participants who failed to discuss any ethical issues did in fact reflect on these matters internally, but chose not to articulate their thoughts, possibly due to the interview context itself. Another explanation may be that the participants had developed a degree of detachment from the more ethically complex and emotionally challenging aspects of their role, and so unconsciously focused on the risk factors of

the two cases. Arlie Hochschild's concept of 'emotional labour', that is, "labor that requires one to induce or suppress feeling" (Hochschild, 1983, p. 7) could be relevant here, as managing large caseloads may necessitate suppressing internal ethical conflicts in order to meet constant work demands. This could also link to Harry Ferguson's analysis of the reasons why social workers may avoid certain tasks when 'doing' child protection work: as a strategy for emotional survival. Importantly, Ferguson (2005, p. 794) stressed that "[w]orkers need to take care of body and soul and be systematically supported in organisations to do so", citing peer support as one mechanism for this. Having greater opportunities to share and discuss work pressures or dilemmas with peers could therefore encourage social workers to more directly attend to the difficult and often unavoidable ethical challenges of child protection practice.

8.4.3 Ethical engagement from a comparative perspective

The findings of this study have provided new insights into how social workers in different contexts engage with ethics when responding to referrals, and think about the broader ethical challenges associated with child protection social work. This is a useful contribution to existing scholarship when relatively few empirical studies have explored social work ethics from a comparative perspective. As discussed above, the findings of this study have shown that both the English and Finnish participants tended to focus on the risk factors within the vignettes over the ethical complexities of the cases. However, in the second half of the interviews, the participants'

responses provided additional insights into the types of ethical issues experienced and how the participants handled these common ethical dilemmas.

A key finding in this regard is the fact that participants from both England and Finland cited balancing families' human rights and children's best interests as their dominant ethical concern; this included the constant challenge of protecting children's welfare while respecting parents' rights to self-determination.

Additionally, across both samples participants appeared to display a consequentialist ethical perspective, with comments such as "always the child is the client and the primary goal is to try and find the best interests of the child" (Finnish participant 14, municipality 3). Such comments support the findings of single-county studies which have similarly observed social workers ranking children's safety and best interests as their foremost ethical priority (Freymond et al., 2013; McAuliffe & Sudbery, 2005). Together with the comparative data from this study, it may be inferred that internationally, or at least within the developed child protection systems where research has been conducted, social workers tend to experience the ethical challenges of child protection in similar ways.

As well as the national similarities outlined above, differences emerged in how the participants discussed and approached other ethical issues, such as confidentiality, respecting children's wishes and the challenges posed by resource constraints. For example, among the English participants there appeared to be a relatively stronger focus on respecting parents' rights to confidentiality, which I have argued could be related to the absence of mandatory reporting in England, unlike in Finland. Additionally, the Finnish participants appeared to be more willing to talk to

children without parental consent, which could be linked to the growing emphasis on children's rights within the country (Pösö, 2011). Such differences in ethical sensitivity may also be related to the dominant cultural value perspectives present in the two nations (Fox Harding, 1997), which in turn may have helped to shape the respective child protection systems (Gilbert, 1997; Gilbert et al., 2011b). The focus on parental confidentiality in England, for example, may be indicative of the child protection orientation with its high threshold for intervention and strong defence of private family life. Similarly, the fact that many of the English participants described dilemmas related to resource constraints arguably highlights the relative lack of preventative focus within this high threshold system. The relatively stronger focus on children's rights within the Finnish responses may too be symptomatic of the shift towards the child-focused orientation in contemporary Finnish policy and practice (Gilbert et al., 2011a; Pösö, 2011). Such findings highlight that, while certain core ethical perspectives may be shared by child protection social workers in different contexts (namely, prioritising children's welfare and best interests), perspectives on other ethical issues may be shaped to a greater extent by the national cultural, policy and practice environment.

A further relevant finding concerning ethics relates to the apparent variation in ethical engagement at an individual level. As I have discussed, a minority of participants across both samples did not refer to any ethical issues within the vignettes, while others offered lengthy and considered accounts of key dilemmas. This difference supports previous studies which have identified variations in how individual social workers conceptualise and articulate the ethical dimensions of cases

in everyday practice (Banks, 2016; Banks & Williams, 2005). Moreover, the fact that all 30 participants in this study stated that they sought support from other people when managing ethical dilemmas is highly significant and supports the findings of research by Rossiter et al. (2000). This suggests that our focus should not be on how individual social workers engage with ethics, but on how social workers, *when situated in their work and contextual environments*, negotiate ethical problems with others when making real-world practice judgments and decisions.

8.5 Implications for practice

Given the power that social workers have in their role, it is appropriate and ethical that practice is informed by reliable research evidence, alongside practitioner and service user expertise. As the aims of this research study were exploratory in nature, it has not been possible to draw definitive conclusions for the purposes of informing practice. Nevertheless, within this chapter I have discussed a range of findings that have direct relevance to practice, and in the section below I expand on three topics I believe would benefit from further investigation and practice development; these include: i) strengthening support networks; ii) sharing knowledge and practice expertise cross-nationally; and iii) promoting ethical reflection.

8.5.1 Strengthening support networks

The results of this study have demonstrated the critical importance support structures have in helping social workers to negotiate ethical dilemmas and make practice

decisions. In England, the data indicated a high level of managerial involvement and supervised decision-making, which as discussed, raises questions around whether social workers in England are being afforded sufficient autonomy to develop their personal judgement, reflection and decision-making skills. As such, there would be value in exploring alternative team structures and supervisory arrangements in England, and to consider whether there may be potential to increase opportunities for co-working and/or external group supervision, both of which were found to be common in Finland. This may provide English social workers with more opportunities to receive support, share knowledge and reflect on cases outside of their traditional hierarchical supervisory relationship. In addition, given the evidence of heightened ethical stress among many of the English participants, extended support networks would provide English social workers with greater access to peer support, which may in turn help to reduce feelings of stress and isolation. Additional research in this area would be helpful, particularly as many of the English participants cited resource constraints and a lack of services for children and families as contributing factors in their experiences of ethical stress; extending support networks may not therefore tackle the root causes of these specific problems. Moreover, attempts to increase opportunities for co-working would likely require greater investment in human resources, which may prove challenging when many English local authorities are experiencing considerable financial pressures and problems with worker retention (Department for Education, 2017d).

Support for the Finnish social workers in this study was mainly provided by co-workers and team colleagues, and there was some indication that managers were

not always available to offer case guidance and advice. Research discussed in chapter two revealed that over of a third of Finnish social workers in one survey reported management or organisational factors as being barriers to child welfare decision-making (Juhasz & Skivenes, 2018); this could support the findings of my own study and indicate that greater management support for social workers may be desirable in Finnish child welfare services. If this finding is supported through further research, other areas for exploration may be whether managers in Finland themselves may benefit from additional support, or a reassessment of their duties, to increase the time they have available for providing support and guidance to social workers within their teams.

8.5.2 Sharing knowledge and practice expertise

A notable finding of this study concerned the participants' responses to the vignettes, and to the second vignette involving 14-year-old Sam in particular. In the English sample, two-thirds of participants cited the risk of grooming or child sexual exploitation as their main concern when discussing the case, while in the Finnish sample, almost all of the participants cited Sam's suicide ideation as their primary concern. In chapter seven, I considered possible explanations for this difference, including the widespread media coverage and policy debate around child sexual exploitation in England, and recent campaigns to reduce youth suicide in Finland, both of which were likely to have influenced the participants' responses. As regards social work decision-making, this finding reveals an obvious connection between events and debates at the national level, and practitioner knowledge and awareness at

an individual and organisational level. This finding is significant as it suggests that the English participants in this study were more attuned to the risk of child sexual exploitation, while the Finnish social workers had greater awareness of suicide and youth mental health. However, because grooming and youth suicide are problems that occur in both the English and Finnish contexts, albeit to different extents, I believe this illustrates the potential for expanding communication channels for the purpose of sharing practitioner knowledge and expertise across national boundaries. From my own perspective, it seemed that the English participants in this study could have learned much from the Finnish participants, and vice versa.

As discussed in chapter four, one way in which researchers and academic communities may benefit from comparative research is through ‘learning with others’. Baistow (2000, p. 12) suggests this may be best achieved through processes of interchange and exchange within international research networks. Indeed, collaborative research projects such as the four-country study *Legitimacy and Fallibility in Child Welfare Services* (University of Bergen, 2012), which produced several of the publications cited in this thesis (see Berrick et al., 2016b; Juhasz & Skivenes, 2018; Skivenes & Tonheim, 2016), are good examples of how learning with others may be achieved in practice. However, I believe it is vital that any cross-national learning is communicated to and acted upon at the practice level, wherever possible and appropriate. As such, there may be scope to establish more formal international professional networks to aid such processes of knowledge exchange, awareness-raising and reflection within local social work agencies. The issue of reflection is important, as this may help to ensure that when assessing cases, social

workers can avoid overstating risk in some areas and understating it in others as a result of external, macro-level influences and personal biases. The fact that many of the English participants in this study mentioned the risk of child sexual exploitation before discussing Sam's mental health – despite the reference to suicide and the possibility for imminent loss of life – arguably illustrates the potential danger of social workers' individual and collective risk thresholds' being unduly influenced by media and policy narratives. Having opportunities to see how child welfare problems are responded to in different contexts – through, for example, international professional networks – may therefore help social workers to think more critically and reflexively when assessing risk situations.

8.5.3 Promoting ethical reflection

When the participants were asked to describe the ethical issues that affect children's social workers in their country, the responses indicated that all participants were cognisant of broad ethical concepts and debates. However, when discussing the case vignettes, almost a third of the participants did not refer to any ethical issues. As discussed previously, there are many explanations for this finding and it is possible that these participants may have reflected on these matters internally, even if they did not articulate their thoughts. However, it is also possible that despite a general ethical awareness and understanding, some participants may have struggled to engage with their ethical knowledge when presented with the referral information, instead focusing their attention on the risk factors of the cases. The fact that this occurred within both samples and across local authorities and municipalities suggests that how

social workers engage with ethics may be principally related to individual, rather than organisational or national level factors. That so few cross-national studies have compared how social workers' respond to ethical dilemmas highlights a clear need for further research in this area. Further comparative research could help to reveal whether similar, individual-level variations in ethical engagement are common in different research contexts. If this phenomenon is observed more widely, it may then be constructive to explore how social workers may be supported to incorporate more explicit ethical engagement into everyday practice, particularly at the point of referral. Frameworks such as the DECIDE model (Lonne et al., 2015), discussed in chapter two, may be one example of how to achieve this.

Finally, when the participants were asked how they respond to ethical problems in practice, all reported that they seek support and advice from others, be that co-workers, team colleagues, managers or external supervisors. This finding reinforces the importance of strengthening support networks, discussed above, but also has relevance to theoretical debates on social work ethics more widely. Since individual social workers' appear to engage with ethics to differing extents, but in practice, dilemmas tend to be resolved through discussion with colleagues, an important topic for further research is how shared decision-making processes and dynamics influence ethical deliberation and engagement. I have suggested that extending social workers' support networks may help to promote ethical reflection; if this is supported through further research, this finding could have important implications for future debates on social work ethics, social work education and agency practice alike.

Child protection social work is a complex and often challenging area of practice. The social workers who participated in this study described a wide range of decision-making responsibilities, from routine choices to long-term, life-changing decisions, most of which involved the fundamental dilemma of balancing families' right to self-determination with children's best interests. Given the gravity of these decisions and what can be at stake, it is crucial that adequate professional and emotional support is provided to social workers, and that social workers are given the time, space and opportunity to process and work through the ethical challenges of their work before pushing on to their next pressing task.

By expanding and refining the support networks available, and by fostering a culture of discussion and reflection, organisations internationally may provide new opportunities for social workers to share and explore the ethical complexities of their work, which in turn, may help to better integrate explicit ethical engagement into everyday practice decisions.

References

- Adams, Adrian, Erath, Peter, & Shardlow, Steven M. (2000a). *Fundamentals of social work in selected European countries: historical and political context, present theory, practice, perspectives*. Lyme Regis: Russell House Publishing.
- Adams, Adrian, Erath, Peter, & Shardlow, Steven M. (2000b). *Key themes in European social work: theory, practice, perspectives*. Lyme Regis: Russell House Publishing.
- Adams, Adrian, Erath, Peter, Shardlow, Steven M, & Sing, Horst. (2000). Towards European perspectives on social work. In Adrian Adams, Peter Erath, & Steven M Shardlow (Eds.), *Fundamentals of social work in selected European countries: historical and political context, present theory, practice, perspectives* (pp. 139-151). Lyme Regis: Russell House Publishing.
- Ainsaar, Mare, & Loof, Lars. (2011). *Online behaviour related to child sexual abuse: Literature report*. Retrieved from http://www.childrenatrisk.eu/robert/public/Online_behaviour_related_to_sexual_abuse.pdf
- Alanen, Leena, Sauli, Hannele, & Strandell, Harriet. (2004). *Children and childhood in a welfare state: The case of Finland*. Trondheim: Norwegian Centre for Child Research.
- Audit Commission. (1994). *Seen but not heard: Co-ordinating community child health and social services for children in need*. London: HMSO.
- Baistow, Karen. (2000). Cross-national research: What can we learn from inter-country comparisons. *Social Work in Europe*, 7(3), 8-13.
- Banks, Sarah. (2008). Critical commentary: Social work ethics. *British Journal of Social Work*, 38(6), 1238-1249.
- Banks, Sarah. (2012). *Ethics and values in social work* (4th ed.). Basingstoke: Palgrave Macmillan.
- Banks, Sarah. (2016). Everyday ethics in professional life: social work as ethics work. *Ethics and Social Welfare*, 10(1), 35-52.
- Banks, Sarah, & Nøhr, Kirsten. (2012). *Practising social work ethics around the world: Cases and commentaries*. London: Routledge.
- Banks, Sarah, & Williams, Robin. (2005). Accounting for ethical difficulties in social welfare work: Issues, problems and dilemmas. *British Journal of Social Work*, 35(7), 1005-1022.

- Baumann, Donald J, Fluke, John D, Dalglish, Len, & Kern, Homer. (2014). The decision-making ecology. In Aron Shlonsky & Rami Benbenishty (Eds.), *From evidence to outcomes in child welfare: An international reader* (pp. 24-40). New York: Oxford University Press.
- Baumann, Donald J, Law, J Randolph, Sheets, Janess, Reid, Grant, & Graham, J Christopher. (2005). Evaluating the effectiveness of actuarial risk assessment models. *Children and Youth Services Review*, 27(5), 465-490.
- BBC News. (2019, 15 April). Finland election: Tough coalition talks after split poll. *BBC News*. Retrieved from https://www.bbc.co.uk/news/world-europe-47893264?intlink_from_url=https://www.bbc.co.uk/news/topics/c877xe1w9qdt/finland-election-2019&link_location=live-reporting-story
- Beauchamp, Tom L, & Childress, James F. (2001). *Principles of biomedical ethics* (5th ed.). New York: Oxford University Press.
- Beck, Ulrich. (1992). *Risk society: Towards a new modernity*. London: Sage.
- Benbenishty, Rami, Davidson-Arad, Bilha, López, Mónica, Devaney, John, Spratt, Trevor, Koopmans, Carien, . . . Hayes, David. (2015). Decision making in child protection: An international comparative study on maltreatment substantiation, risk assessment and interventions recommendations, and the role of professionals' child welfare attitudes. *Child Abuse & Neglect*, 49, 63-75.
- Benbenishty, Rami, Osmo, Rujla, & Gold, Nora. (2003). Rationales provided for risk assessments and for recommended interventions in child protection: A comparison between Canadian and Israeli professionals. *British Journal of Social Work*, 33(2), 137-155.
- Benbenishty, Rami, Segev, Dan, & Surkis, Tami. (2002). Information-search and decision-making by professionals and nonprofessionals in cases of alleged child-abuse and maltreatment. *Journal of Social Service Research*, 28(3), 1-18.
- Berrick, Jill, Dickens, Jonathan, Pösö, Tarja, & Skivenes, Marit. (2016a). Parents' involvement in care order decisions: a cross-country study of front-line practice. *Child & Family Social Work*, 22(2), 626-637.
- Berrick, Jill, Dickens, Jonathan, Pösö, Tarja, & Skivenes, Marit. (2016b). Time, institutional support, and quality of decision making in child protection: A cross-country analysis. *Human Service Organizations: Management, Leadership & Governance*, 40(5), 451-468.

- Berrick, Jill, Peckover, Sue, Pösö, Tarja, & Skivenes, Marit. (2015). The formalized framework for decision-making in child protection care orders: A cross-country analysis. *Journal of European Social Policy*, 25(4), 366-378.
- Berridge, David. (1997). England: Child abuse reports, responses and reforms. In Neil Gilbert (Ed.), *Combatting child abuse: International perspectives and trends*. (pp. 72-101). New York: Oxford University Press.
- Blomberg, Helena, Corander, Clary, Kroll, Christian, Meeuwisse, Anna, Scaramuzzino, Roberto, Swärd, Hans, . . . Kröger, Teppo. (2010). A Nordic model in child welfare? In Hannele Forsberg & Teppo Kröger (Eds.), *Social work and child welfare politics: Through Nordic lenses* (pp. 29-45). Bristol: The Policy Press.
- Bradley, Greta, & Höjer, Staffan. (2009). Supervision reviewed: reflections on two different social work models in England and Sweden: Granskad handledning: reflektioner från två olika handledningsmodeller i England och Sverige. *European Journal of Social Work*, 12(1), 71-85.
- Braye, Suzy, Preston-Shoot, Michael, & Wigley, Veronica. (2013). Deciding to use the law in social work practice. *Journal of Social Work*, 13(1), 75-95.
- British Association of Social Workers. (2014). *The code of ethics for social work: statement of principles*. Birmingham: BASW.
- British Association of Social Workers. (2016). *BASW calls for evidence on the role of the social worker in adoption*. Retrieved from: <https://www.basw.co.uk/news/article/?id=1158>
- British Association of Social Workers. (2017). *BASW response to Working Together to Safeguard Children: changes to statutory guidance*. Retrieved from: <https://www.basw.co.uk/media/news/2017/dec/basw-response-working-together-safeguard-children-changes-statutory-guidance>
- Broadhurst, K, Wastell, D, White, Sue, Hall, Christopher, Peckover, Sue, Thompson, K, . . . Davey, D. (2010). Performing 'initial assessment': Identifying the latent conditions for error at the front-door of local authority children's services. *British Journal of Social Work*, 40(2), 352-370.
- Brunnberg, Elinor, & Pećnik, Ninoslava. (2007). Assessment processes in social work with children at risk in Sweden and Croatia. *International Journal of Social Welfare*, 16(3), 231-241.
- Bunting, Lisa, McCartan, Claire, McGhee, Janice, Bywaters, Paul, Daniel, Brigid, Featherstone, Brid, & Slater, Tom. (2018). Trends in child protection across the UK: A comparative analysis. *British Journal of Social Work*, 48(5), 1154-1175.

- Burns, Kenneth, Pösö, Tarja, & Skivenes, Marit. (2016a). Child welfare removals by the state - Complex and controversial decisions. In Kenneth Burns, Tarja Pösö, & Marit Skivenes (Eds.), *Child Welfare Removals by the State: A Cross-Country Analysis of Decision-Making Systems* (pp. 1-17). Oxford: Oxford University Press.
- Burns, Kenneth, Pösö, Tarja, & Skivenes, Marit. (2016b). *Child welfare removals by the state: A cross-country analysis of decision-making systems*. New York: Oxford University Press.
- Burns, Kenneth, Pösö, Tarja, & Skivenes, Marit. (2016c). Removal of children by the child welfare system - Variations and differences across countries. In Kenneth Burns, Tarja Pösö, & Marit Skivenes (Eds.), *Child Welfare Removals by the State: A Cross-Country Analysis of Decision-Making Systems* (pp. 223-243). Oxford: Oxford University Press.
- Butler, Ian. (2002). A code of ethics for social work and social care research. *British Journal of Social Work*, 32(2), 239-248.
- Charmaz, Kathy. (2014). *Constructing grounded theory* (2nd ed.). London: Sage.
- Cherry, Gemma M, Perkins, Elizabeth, Dickson, Rumona, & Boland, Angela. (2013). Reviewing qualitative evidence. In Angela Boland, M Gemma Cherry, & Rumona Dickson (Eds.), *Doing a systematic review: A student's guide* (pp. 141-158). London: Sage Publications.
- Clark, Chris. (1999). Observing the lighthouse. *European Journal of Social Work*, 2(3), 259-270.
- Clark, Chris. (2000). *Social work ethics: Politics, principles and practice*. Basingstoke: Palgrave Macmillan.
- Clarke, John. (1996). After social work. In Nigel Parton (Ed.), *Social theory, social change and social work* (pp. 36-60). London: Routledge.
- Connolly, M, Katz, I, Shlonsky, A, & Bromfield, L. (2014). *Towards a typology for child protection systems*. Melbourne: University of Melbourne.
- Cooper, Andrew, Freund, Veronique, Grevot, Alain, Hetherington, Rachael, & Pitts, John. (1992). *The social work role in child protection: An Anglo-French comparison*. London: Centre for Comparative Social Work Studies, Brunel University.
- Cooper, Andrew, Hetherington, Rachael, Baistow, Karen, Pitts, John, & Spriggs, Angela. (1995). *Positive child protection: A view from abroad*. Lyme Regis: Russell House Publishing.

- Curry, Dale, McCarragher, Timothy, & Dellmann-Jenkins, Mary. (2005). Training, transfer, and turnover: Exploring the relationship among transfer of learning factors and staff retention in child welfare. *Children and Youth Services Review*, 27(8), 931-948.
- D'Cruz, Heather. (2004). The social construction of child maltreatment: The role of medical practitioners. *Journal of Social Work*, 4(1), 99-123.
- Dale, Peter. (2004). 'Like a fish in a bowl': parents' perceptions of child protection services. *Child Abuse Review*, 13(2), 137-157.
- Delanty, Gerard, & Strydom, Piet. (2003). *Philosophies of social science: The classic and contemporary readings*. Maidenhead: Open University Press.
- Denzin, Norman K, & Lincoln, Yvonna S. (2017). Part III: Strategies of Inquiry. In Norman K Denzin & Yvonna S Lincoln (Eds.), *The Sage Handbook of Qualitative Research* (5th ed., pp. 309-321). London: Sage.
- Department for Education. (2012). *An action plan for adoption: tackling delay*. Retrieved from: <https://www.gov.uk/government/publications/an-action-plan-for-adoption-tackling-delay>
- Department for Education. (2015). *The Children Act 1989 guidance and regulations. Volume 2: care planning, placement and case review*. London: Department for Education.
- Department for Education. (2017a). *Characteristics of children in need: 2016 to 2017*. Retrieved from: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/65639/5/SFR61-2017_Main_text.pdf
- Department for Education. (2017b). *Child sexual exploitation: Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation*. London: Department for Education.
- Department for Education. (2017c). *Children looked after in England including adoption: 2016 to 2017*. Retrieved from: <https://www.gov.uk/government/statistics/children-looked-after-in-england-including-adoption-2016-to-2017>
- Department for Education. (2017d). *Experimental statistics: Children and family social work workforce in England, year ending 30 September 2016: SFR 08/2017*. Retrieved from: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/59191/4/SFR08-2017_Main_Text.pdf
- Department of Health. (1995). *Child protection: Messages from research*. London: HMSO.

- Department of Health, Department for Education and Employment, & Home Office. (2000). *Framework for the assessment of children in need and their families*. London: HMSO.
- Department of Health, Home Office, & Employment, Department for Education and. (1999). *Working together to safeguard children: a guide to inter-agency working to safeguard and promote the welfare of children*. London: HMSO.
- Dingwall, Robert. (1977). "Atrocity stories" and professional relationships. *Sociology of Work and Occupations*, 4(4), 371-396.
- Dolgoff, Ralph, Harrington, Donna, & Loewenberg, Frank M. (2012). *Ethical decisions for social work practice* (9th ed.). Belmont, CA: Thomson Brooks/Cole.
- Drury-Hudson, Julie. (1999). Decision making in child protection: The use of theoretical, empirical and procedural knowledge by novices and experts and implications for fieldwork placement. *British Journal of Social Work*, 29(1), 147-169.
- Duncan, Simon. (1999). *Comparative research: The case of genderfare*. Paper presented at the Care, Values and the Future of Welfare, University of Leeds.
<https://www.leeds.ac.uk/cava/papers/wsp3.pdf>
- Economic and Social Research Council. (2015). *ESRC Framework for research ethics: Updated January 2015*. Retrieved from: <https://esrc.ukri.org/files/funding/guidance-for-applicants/esrc-framework-for-research-ethics-2015/>
- Education Committee. (2012). *Children first: the child protection system in England. Fourth Report of Session 2012–13*. (HC 137). London: HMSO.
- EPPI-Centre. (2010). *EPPI-Centre methods for conducting systematic reviews*. Retrieved from:
<https://eppi.ioe.ac.uk/cms/LinkClick.aspx?fileticket=hQBu8y4uVwI%3D&tabid=88>
- Esping-Andersen, Gøsta. (1990). *The three worlds of welfare capitalism*. Cambridge: Polity Press.
- European Commission. (2013). *The current situation of gender equality in Finland - Country Profile*. Retrieved from: http://ec.europa.eu/justice/gender-equality/files/epo_campaign/131205_country-profile_finland.pdf
- Evans, Tony, & Harris, John. (2004). Street-level bureaucracy, social work and the (exaggerated) death of discretion. *British Journal of Social Work*, 34(6), 871-895.
- Fagerström, Katarina, & Karvinen-Niinikoski, Synnöve. (2013). Developments in the systemic ideas of social work and family therapy. In Walter Milowiz & Michaela

- Judy (Eds.), *STEP: Systemic social work throughout Europe Insights* (pp. 18-29): European Commission.
- Falconer, Rachel, & Shardlow, Steven M. (2018). Comparing child protection decision making in England and Finland: supervised or supported judgement? *Journal of Social Work Practice*, 32(2), 111-124.
- Featherstone, Brid, Gupta, Anna, & Mills, Sue. (2018). The role of the social worker in adoption—ethics and human rights: An Enquiry. Birmingham: British Association of Social Workers.
- Featherstone, Brid, Morris, Kate, & White, Sue. (2014). *Re-imagining child protection: Towards humane social work with families*. Bristol: Policy Press.
- Fenton, Jane. (2014). An analysis of ‘ethical stress’ in criminal justice social work in Scotland: the place of values. *British Journal of Social Work*, 45(5), 1415-1432.
- Ferguson, Harry. (2005). Working with violence, the emotions and the psycho-social dynamics of child protection: reflections on the Victoria Climbié case. *Social Work Education*, 24(7), 781-795.
- Finch, Janet, & Mason, Jennifer. (2003). *Negotiating family responsibilities*. London: Routledge.
- Fluke, John D, Baumann, Donald J, Dalglish, Len I, & Kern, Homer D. (2014). Decisions to protect children: A decision making ecology. In Jill E Korbin & Richard D Krugman (Eds.), *Handbook of child maltreatment* (pp. 463-476). New York: Springer.
- Forrester, Donald, Westlake, David, McCann, Michelle, Thurnham, Angela, Shefer, Guy, Glynn, Georgia, & Killian, Mike. (2013). *Reclaiming social work? an evaluation of systemic units as an approach to delivering children’s services*. Luton: University of Bedfordshire.
- Forsberg, Hannele, & Kröger, Teppo. (2010). *Social work and child welfare politics: Through Nordic lenses*. Bristol: Policy Press,.
- Forsberg, Hannele, & Ritala-Koskinen, Aino. (2010). From welfare to illfare: public concern for Finnish childhood. In Hannele Forsberg & Teppo Kröger (Eds.), *Social work and child welfare politics through the Nordic Lenses* (pp. 47-64).
- Forsberg, Hannele, & Vagli, Åse. (2006). The social construction of emotions in child protection case-talk. *Qualitative Social Work*, 5(1), 9-31.
- Fox Harding, Lorraine. (1997). *Perspectives in child care policy* (2nd ed.). London: Routledge.

- Freeman, Richard. (2008). A national health service, by comparison. *Social History of Medicine*, 21(3), 503-520.
- Freymond, Nancy, Schmid, Jeanette, & DeGeer, Ian. (2013). Values 'talk' at the front lines of child welfare work in Ontario. *Journal of Social Work Values & Ethics*, 10(1), 32-44.
- Furrow, Dwight. (2005). *Ethics: Key concepts in philosophy*. London: Bloomsbury.
- Giddens, Anthony. (1998). *The third way: The renewal of social democracy*. Cambridge: Polity Press.
- Gilbert, Neil. (1997). *Combatting child abuse: International perspectives and trends*. New York: Oxford University Press.
- Gilbert, Neil. (2012). A comparative study of child welfare systems: Abstract orientations and concrete results. *Children & Youth Services Review*, 34(3), 532-536.
- Gilbert, Neil, Parton, Nigel, & Skivenes, Marit. (2011a). Changing patterns of response and emerging orientations. In Neil Gilbert, Nigel Parton, & Marit Skivenes (Eds.), *Child protection systems: International trends and orientations* (pp. 243-257). Oxford: Oxford University Press.
- Gilbert, Neil, Parton, Nigel, & Skivenes, Marit. (2011b). *Child protection systems: International trends and orientations*. New York: Oxford University Press.
- Gilligan, Carol. (1982). *In a different voice: psychological theory and women's development*. Cambridge, Mass: Harvard University Press.
- Gillingham, Philip, & Humphreys, Cathy. (2010). Child protection practitioners and decision-making tools: Observations and reflections from the front line. *British Journal of Social Work*, 40(8), 2598-2616.
- Glad, Johan. (2006). Co-operation in a child welfare case: a comparative cross-national vignette study: Samarbete i ett socialt barnavårdsärende: en jämförande tvärnationell vinjettstudie. *European Journal of Social Work*, 9(2), 223-240.
- Glasby, Jon, & Beresford, Peter. (2006). Commentary and issues: Who knows best? Evidence-based practice and the service user contribution. *Critical Social Policy*, 26(1), 268-284.
- Glaser, B, & Strauss, A. (1967). *The discovery of grounded theory: Strategies for qualitative research*. Chicago: Aldine Publishing.
- Glass, Norman. (1999). Sure Start: the development of an early intervention programme for young children in the United Kingdom. *Children & Society*, 13(4), 257-264.

- Goldman, Laurie S, & Foldy, Erica Gabrielle. (2015). The space before action: The role of peer discussion groups in frontline service provision. *Social Service Review*, 89(1), 166-202.
- Gough, & Spencer, Elaine. (2014). Ethics in action: An exploratory survey of social worker's ethical decision making and value conflicts. *Journal of Social Work Values and Ethics*, 11(2), 23-40.
- Gough, David. (2007). Weight of Evidence: a framework for the appraisal of the quality and relevance of evidence. *Research Papers in Education*, 22(2), 213-228.
- Gray, Mel, Plath, Debbie, & Webb, Stephen. (2009). *Evidence-based social work: A critical stance*. London: Routledge.
- Grbich, Carol. (2012). *Qualitative data analysis: An introduction*. London: Sage.
- Greenwich Safeguarding Children Board. (2015). *CSE risk assessment tool*. Retrieved from: https://www.greenwichsafeguardingchildren.org.uk/downloads/file/78/cse_risk_assessment_tool
- Gubrium, Jaber F. (2012). *The SAGE handbook of interview research: The complexity of the craft*. London: Sage.
- Guidi, Paolo, Meeuwisse, Anna, & Scaramuzzino, Roberto. (2016). Italian and Nordic social workers' assessments of families with children at risk. *Nordic Social Work Research*, 6(1), 4-21.
- Guillemin, Marilys, & Gillam, Lynn. (2004). Ethics, reflexivity, and "ethically important moments" in research. *Qualitative Inquiry*, 10(2), 261-280.
- Habermas, Jürgen. (1984). *The theory of communicative action, Volume 1: Reason and the rationalization of society*. London: Heinemann.
- Hackett, Simon, & Taylor, Abi. (2014). Decision making in social work with children and families: The use of experiential and analytical cognitive processes. *British Journal of Social Work*, 44(8), 2182-2199.
- Hämäläinen, Juha. (2012). Developments in child protection and child welfare policies in Finland. In Juha Hämäläinen, Brian Littlechild, Oldrich Chytil, Miriam Šramatá, & Emmanuel Jovelin (Eds.), *Evolution of child protection and child welfare policies in selected European countries* (pp. 127-146). Ostrava: Albert Publisher.
- Hämäläinen, Juha. (2014). Comparative research in social work: methodological considerations using the 'diachronic-synchronic' distinction in linguistics. *European Journal of Social Work*, 17(2), 192-205.
- Hämäläinen, Juha, & Niemelä, Pauli. (2000). Social policy and social work in Finland. In Adrian Adams, Peter Erath, & Steven M Shardlow (Eds.), *Fundamentals of Social*

- Work in Selected European Countries: Historical and political context, present theory, practice, perspectives* (pp. 25-36). Lyme Regis: Russell House Publishing.
- Harder, Margit, & Pringle, Keith. (1997). *Protecting children in Europe: Towards a new millennium*. Aalborg: Aalborg University Press.
- Harrington, Donna, & Dolgoff, Ralph. (2008). Hierarchies of ethical principles for ethical decision making in social work. *Ethics and Social Welfare*, 2(2), 183-196.
- Harris, John. (2008). State social work: Constructing the present from moments in the past. *British Journal of Social Work*, 38(4), 662-679.
- Harris, Nigel. (1994). Professional codes and Kantian duties. In Ruth Chadwick (Ed.), *Ethics and the Professions* (pp. 104-115). Aldershot: Avebury.
- Hastings, Annette, Bailey, Nick, Bramley, Glen, Gannon, Maria, & Watkins, David. (2015). *The cost of the cuts: the impact on local government and poorer communities*. York: Joseph Rowntree Foundation.
- Hayes, David, & Spratt, Trevor. (2009). Child welfare interventions: Patterns of social work practice. *British Journal of Social Work*, 39(8), 1575-1597.
- Hayes, David, & Spratt, Trevor. (2014). Child welfare as child protection then and now: What social workers did and continue to do. *British Journal of Social Work*, 44(3), 615-635.
- Health and Care Professions Council. (2016). *Standards of conduct, performance and ethics*. Retrieved from London: <https://www.hcpc-uk.org/standards/standards-of-conduct-performance-and-ethics/>
- Health and Care Professions Council. (2017). *Standards of proficiency: social workers in England*. London: Health and Care Professions Council Retrieved from <https://www.hcpc-uk.org/globalassets/resources/standards/standards-of-proficiency--social-workers-in-england.pdf>.
- Health and Care Professions Council. (2018). *Registrants by gender England*. Retrieved from: <http://www.hpc-uk.org/assets/documents/10005135Registrants-by-gender-England-July-2016.pdf>
- Healy, Lynne M. (2008). *International social work: Professional action in an interdependent world* (2nd ed.). New York: Oxford University Press.
- Hearn, Jeff, Pösö, Tarja, Smith, Carole, White, Sue, & Korpinen, Johanna. (2004). What is child protection? Historical and methodological issues in comparative research on lastensuojelu/child protection. *International Journal of Social Welfare*, 13(1), 28-41.

- Helm, Duncan, & Roesch-Marsh, Autumn. (2017). The ecology of judgement: a model for understanding and improving social work judgements. *British Journal of Social Work*, 47(5), 1361–1376.
- Hetherington, Rachael. (1998). Issues in European child protection research. *European Journal of Social Work*, 1(1), 71-82.
- Hetherington, Rachael. (2002). *Learning from difference: Comparing child welfare systems*. Waterloo, ON: Wilfrid Laurier University.
- Hetherington, Rachael, Cooper, Andrew, Smith, Philip, & Wilford, Gerti. (1997). *Protecting children: Messages from Europe*. Lyme Regis: Russell House Publishing.
- Hiilamo, Heikki. (2009). What could explain the dramatic rise in out-of-home placement in Finland in the 1990s and early 2000s? *Children and Youth Services Review*, 31(2), 177-184.
- Hinman, Lawrence. (2012). *Ethics: A pluralistic approach to moral theory* (5th ed.). Belmont: Wadsworth.
- HM Government. (2010). *Working together to safeguard children: A guide to inter-agency working to safeguard and promote the welfare of children*. London: HMSO.
- HM Government. (2013). *Working together to safeguard children: A guide to inter-agency working to safeguard and promote the welfare of children* London: HMSO.
- HM Government. (2015). *Working together to safeguard children: A guide to inter-agency working to safeguard and promote the welfare of children*. London: HMSO.
- HM Government. (2018a). *Information sharing: advice for practitioners providing safeguarding services to children, young people, parents and carers*. London: HMSO.
- HM Government. (2018b). *Working together to safeguard children: A guide to inter-agency working to safeguard and promote the welfare of children* London: HMSO.
- HM Treasury. (2003). *Every child matters*. London: HMSO.
- Hochschild, Arlie Russell. (1983). *The managed heart: Commercialization of human feeling*. Berkeley: University of California Press.
- Hofstede Insights. (2017). *Country comparison*. Retrieved from: <https://www.hofstede-insights.com/country-comparison/finland,the-uk,the-usa/>
- Holland, Sally. (1999). Discourses of decision making in child protection: conducting comprehensive assessments in Britain. *International Journal of Social Welfare*, 8(4), 277-287.
- Holt, Kim. (2014). *Child protection (Focus on social work law)*. Basingstoke: Palgrave Macmillan.

- Houston, Stan, & Campbell, Jim. (2001). Using critical social theory to develop a conceptual framework for comparative social work. *International Journal of Social Welfare*, 10(1), 66-73.
- Hugman, Richard. (2008). Ethics in a world of difference. *Ethics and Social Welfare*, 2(2), 118-132.
- Hugman, Richard. (2012). *Culture, values and ethics in social work: embracing diversity*. Oxford: Routledge.
- Hugman, Richard, & Bowles, Wendy. (2012). Social work values, ethics and professional regulation. In Karen Lyons, Terry Hokenstad, Manohar Pawar, Nathalie Huegler, & Nigel Hall (Eds.), *The SAGE handbook of international social work* (pp. 150-162). London: SAGE.
- Hussein, Shereen. (2011). *Social work qualifications and regulation in European Economic Area (EEA)*. London: Social Care Workforce Research Unit, Kings College London.
- Information Commissioner's Office. (2018). *Guide to the General Data Protection Regulation*. Retrieved from <https://ico.org.uk/for-organisations/guide-to-the-general-data-protection-regulation-gdpr/>
- International Association of Schools of Social Work, & International Federation of Social Workers. (2017). *Draft statement of ethical principles*. Retrieved from: <https://www.iassw-aiets.org/wp-content/uploads/2017/11/Draft-Statement-of-Ethical-Principles.docx>
- International Federation of Social Workers. (2012). *Code of professional ethics of the social workers in Israel*. Retrieved from: <https://www.ifsw.org/code-of-professional-ethics-of-the-social-workers-in-israel/>
- International Federation of Social Workers. (2018). *Global social work statement of ethical principles*. Retrieved from: <http://ifsw.org/policies/statement-of-ethical-principles/>
- International Federation of Social Workers, & International Association of Schools of Social Work. (2012). *Statement of ethical principles*. Retrieved from: <https://www.ifsw.org/global-social-work-statement-of-ethical-principles/>
- Jameton, Andrew. (1984). *Nursing practice: the ethical issues*. London: Prentice-Hall.
- Janis, Irving L. (1972). *Victims of groupthink: a psychological study of foreign-policy decisions and fiascoes*. Boston, Mass: Houghton Mifflin.
- Jay, Alexis. (2014). *Independent inquiry into child sexual exploitation in Rotherham*. Retrieved from: http://www.rotherham.gov.uk/download/downloads/id/1407/independent_inquiry_cs_e_in_rotherham.pdf

- Jones, Catherine. (1985). *Patterns of social policy: An introduction to comparative analysis*. London: Tavistock Publications.
- Jones, Ray. (1996). Decision making in child protection. *British Journal of Social Work*, 26(4), 509-522.
- Juhász, Ida, & Skivenes, Marit. (2018). Child welfare workers' experiences of obstacles in care order preparation: a cross-country comparison. *European Journal of Social Work*, 21(1), 100-113.
- Jupp, Eleanor. (2017). Families, policy and place in times of austerity. *Area*, 49(3), 266-272.
- Kahneman, Daniel. (2012). *Thinking, fast and slow*. London: London: Penguin.
- Kalliomaa-Puha, Laura, & Kangas, Olli. (2016). *In-depth reform of the healthcare system in Finland*. Retrieved from:
<http://ec.europa.eu/social/BlobServlet?docId=15887&langId=en>
- Keddell, Emily. (2011). Reasoning processes in child protection decision making: Negotiating moral minefields and risky relationships. *British Journal of Social Work*, 41(7), 1251-1270.
- Keddell, Emily. (2014). Current debates on variability in child welfare decision-making: a selected literature review. *Social Sciences*, 3(4), 916-940.
- Keinemans, Sabrina, & Kanne, Mariël. (2013). The practice of moral action: A balancing act for social workers. *Ethics and Social Welfare*, 7(4), 379-398.
- Kelly, Elaine, Lee, Tom, Sibieta, Luke, & Waters, Tom. (2018). *Public spending on children in England: 2000 to 2020*. London: Institute for Fiscal Studies.
- Kelly, Emma. (2015). Systematic and just: The use of a systematic review methodology in social work research. *Social Work and Social Sciences Review*, 15(3), 72-85.
- Kempe, C., Silverman, F. N., Steele, B. F., Droegemueller, W., & Silver, H. K. (1962). The battered-child syndrome. *JAMA*, 181(1), 17-24.
- Kemshall, Hazel. (2001). *Risk, social policy and welfare*. Buckingham: Open University Press.
- Kettunen, Pauli. (2010). The Nordic welfare state in Finland. *Scandinavian Journal of History*, 26(3), 225-247.
- Kirkman, Elspeth, & Melrose, Karen. (2014). *Clinical judgement and decision-making in children's social work: An analysis of the 'front door' system*. London: Behavioural Insights Team, Department for Education.
- Klein, Gary A. (1998). *Sources of power: How people make decisions*. Cambridge, MA: MIT press.

- Korkeila, Jyrki. (2013). Suicide prevention in finland: advances and perspectives. *European Psychiatry*, 28, 1. doi:10.1016/s0924-9338(13)77371-1
- Kriz, Katrin, & Skivenes, Marit. (2010). Lost in translation: how child welfare workers in Norway and England experience language difficulties when working with minority ethnic families. *British Journal of Social Work*, 40(5), 1353-1367.
- Lahti, Anniina, Räsänen, Pirkko, Riala, Kaisa, Keränen, Sirpa, & Hakko, Helinä. (2011). Youth suicide trends in Finland, 1969–2008. *Journal of Child Psychology and Psychiatry*, 52(9), 984-991.
- Laming, Herbert. (2003). *The Victoria Climbié Inquiry*. London: HMSO.
- Landau, Ruth. (1999). Professional socialization, ethical judgment and decision making orientation in social work. *Journal of Social Service Research*, 25(4), 57-75.
- Landau, Ruth, & Osmo, Rujla. (2003). Professional and personal hierarchies of ethical principles. *International Journal of Social Welfare*, 12(1), 42-49.
- Lincoln, Yvonna S, & Guba, Egon G. (1985). *Naturalistic inquiry*. London: Sage.
- Linzer, Norman, Conboy, Arlene, & Ain, Eileen. (2003). Ethical dilemmas of Israeli social workers. *International social work*, 46(1), 7-21.
- Lipsky, Michael. (1980). *Street-level bureaucracy: The dilemmas of the individual in public service*. New York: Russell Sage Foundation.
- Littlechild, Brian. (2005). The stresses arising from violence, threats and aggression against child protection social workers. *Journal of Social Work*, 5(1), 61-82.
- Loewenberg, F, Dogloff, R, & Harrington, D. (2000). *Ethical decisions for social work practice* (6th ed.). Belmont, CA: Brooks/Cole.
- Lonne, Bob, Harries, Maria, Featherstone, Brid, & Gray, Mel. (2015). *Working ethically in child protection*. Oxford: Routledge.
- Lorenz, Walter. (1994). *Social work in a changing Europe*. London: Routledge.
- Mänttari-van der Kuip, Maija. (2014). The deteriorating work-related well-being among statutory social workers in a rigorous economic context. *European Journal of Social Work*, 17(5), 672-688.
- Mänttari-van der Kuip, Maija. (2016). Moral distress among social workers: The role of insufficient resources. *International Journal of Social Welfare*, 25(1), 86-97.
- Mason, Jennifer. (2002). *Qualitative researching* (2nd ed.). London: SAGE.
- May, T, & Perry, B. (2011). Comparative research: potential and problems. In Tim May (Ed.), *Social Research: Issues, methods and process* (4th ed., pp. 243-268). Buckingham: Open University Press.

- McAuliffe, Donna, & Sudbery, John. (2005). 'Who do I tell?' Support and consultation in cases of ethical conflict. *Journal of Social Work*, 5(1), 21-43.
- McBeath, Graham, & Webb, Stephen A. (2002). Virtue ethics and social work: Being lucky, realistic, and not doing ones duty. *British Journal of Social Work*, 32(8), 1015-1036.
- McGinn, Tony, Taylor, Brian, McColgan, Mary, & McQuilkan, Janice. (2016). Social work literature searching: Current issues with databases and online search engines. *Research on Social Work Practice*, 26(3), 266-277.
- McLaughlin, Anne Marie, Rothery, Michael, Babins-Wagner, Rochelle Robbie, & Schleifer, Barbara. (2010). Decision-making and evidence in direct practice. *Clinical Social Work Journal*, 38(2), 155-163.
- Meeuwisse, Anna, & Swärd, Hans. (2007). Cross-national comparisons of social work - a question of initial assumptions and levels of analysis. *European Journal of Social Work*, 10(4), 481-496.
- Meysen, Thomas, & Kelly, Liz. (2018). Child protection systems between professional cooperation and trustful relationships: A comparison of professional practical and ethical dilemmas in England/Wales, Germany, Portugal, and Slovenia. *Child & Family Social Work*, 23(2), 222-229.
- Midgley, James. (1981). *Professional imperialism: Social work in the third world*. London: Heinemann Educational Books.
- Ministry of Social Affairs and Health. (2007). *Child Welfare Act (No. 417/2007; amendments up to 1292/2013 included)*. Retrieved from:
<https://www.finlex.fi/en/laki/kaannokset/2007/en20070417.pdf>
- Ministry of Social Affairs and Health. (2016). *Towards child and family-oriented services*. Retrieved from: http://stm.fi/documents/1271139/3208911/LAPE-esite-verkko_ENG_web.pdf/b13d5d01-6ee6-464b-9dbe-399cb018e9da
- Ministry of Social Affairs and Health. (2017). *Programme to address reform in child and family services (LAPE)*. Retrieved from:
<http://www.childrenatrisk.eu/nonviolence/wp-content/uploads/2017/06/Programme-to-address-reform-in-child-and-family-services.pdf>
- Morriss, Lisa. (2015). Nut clusters and crisps: atrocity stories and co-narration in interviews with approved mental health professionals. *Sociology of Health & Illness*, 37(7), 1072-1085.
- Munro, Eileen. (1996). Avoidable and unavoidable mistakes in child protection work. *British Journal of Social Work*, 26(6), 793-808.

- Munro, Eileen. (1999). Common errors of reasoning in child protection work. *Child Abuse & Neglect*, 23(8), 745-758.
- Munro, Eileen. (2004a). The impact of audit on social work practice. *British Journal of Social Work*, 34(8), 1075-1095.
- Munro, Eileen. (2004b). A simpler way to understand the results of risk assessment instruments. *Children and Youth Services Review*, 26(9), 873-883.
- Munro, Eileen. (2008). *Effective child protection* (2nd ed.). London: Sage.
- Munro, Eileen. (2011). *The Munro review of child protection. Final Report: A child-centred system*. London: HMSO.
- Munro, Eileen, & Hubbard, Alison. (2011). A systems approach to evaluating organisational change in children's social care. *British Journal of Social Work*, 41(4), 726-743.
- National Institute for Health and Welfare. (2015). *Lastensuojelu 2015*. Retrieved from: http://www.julkari.fi/bitstream/handle/10024/131625/Tr20_16.pdf?sequence=4
- National Institute for Health and Welfare. (2017). *Personnel in local government health and social services*. Retrieved from: <https://www.thl.fi/en/web/thlfi-en/statistics/statistics-by-topic/personnel-in-the-health-and-social-services/personnel-in-local-government-health-and-social-services>
- Nybom, Jenny. (2005). Visibility and 'child view' in the assessment process of social work: cross-national comparisons. *International Journal of Social Welfare*, 14(4), 315-325.
- O'Sullivan, Terence. (2011). *Decision making in social work* (2nd ed.). Basingstoke: Palgrave Macmillan.
- Office for National Statistics. (2016). *Rural/urban local authority (LA) classification (England)*. Retrieved from: <http://webarchive.nationalarchives.gov.uk/20160111162126/http://www.ons.gov.uk/ons/guide-method/geography/products/area-classifications/rural-urban-definition-and-la/rural-urban-local-authority--la--classification--england-/index.html>
- Osmo, Rujla, & Landau, Ruth. (2006). The role of ethical theories in decision making by social workers. *Social Work Education*, 25(8), 863-876.
- Otway, Olive. (1996). Social work with children and families: From child welfare to child protection. In Nigel Parton (Ed.), *Social theory, social change and social work* (pp. 152-171). London: Routledge.
- Oxfordshire Safeguarding Children Board. (2015). *Serious case review into child sexual exploitation in Oxfordshire: from the experiences of Children A, B, C, D, E, and F*.

Retrieved from <http://www.oscb.org.uk/wp-content/uploads/SCR-into-CSE-in-Oxfordshire-FINAL-FOR-WEBSITE.pdf>

- Papadaki, Eleni, & Papadaki, Vasileia. (2008). Ethically difficult situations related to organizational conditions: Social workers' experiences in Crete, Greece. *Journal of Social Work*, 8(2), 163-180.
- Parton, Nigel. (1991). *Governing the family: Child care, child protection and the state*. London: Macmillan.
- Parton, Nigel. (2011). Child protection and safeguarding in England: Changing and competing conceptions of risk and their implications for social work. *British Journal of Social Work*, 41(5), 854-875.
- Parton, Nigel. (2014a). *The politics of child protection: Contemporary developments and future directions*: Palgrave Macmillan.
- Parton, Nigel. (2014b). Social work, child protection and politics: Some critical and constructive reflections. *British Journal of Social Work*, 44(7), 2042-2056.
- Parton, Nigel. (2017). Comparing child protection systems: Towards a global perspective. In Pat Dolan & Nick Frost (Eds.), *The Routledge handbook of global child welfare* (pp. 225-242). New York: Routledge.
- Pawson, Ray, Boaz, Annette, Grayson, Lesley, Long, Andrew, & Barnes, Colin. (2013). *Types and quality of knowledge in social care*. London: Social Care Institute for Excellence.
- Platt, Dendy, & Turney, Danielle. (2014). Making threshold decisions in child protection: A conceptual analysis. *British Journal of Social Work*, 44(6), 1472-1490.
- Pösö, Tarja. (2011). Combatting child abuse in Finland: From family to child-centered orientation. In Neil Gilbert, Nigel Parton, & Marit Skivenes (Eds.), *Child protection systems: International trends and orientation* (pp. 112-130). New York: Oxford University Press.
- Pösö, Tarja. (2014). Translation as a knowledge transformation practice - the ambiguous case of presenting Finnish child welfare in English. *European Journal of Social Work*, 17(5), 616-626.
- Pösö, Tarja, & Huhtanen, Raija. (2016). Removals of children in Finland. In Kenneth Burns, Tarja Pösö, & Marit Skivenes (Eds.), *Child welfare removals by the state: a cross-country analysis of decision-making systems* (pp. 18-39). Oxford: Oxford University Press.

- Pösö, Tarja, Pekkarinen, Elina, Helavirta, Susanna, & Laakso, Riitta. (2018). 'Voluntary' and 'involuntary' child welfare: Challenging the distinction. *Journal of Social Work*, 18(3), 253-272.
- Pösö, Tarja, Skivenes, Marit, & Hestbæk, Anne-Dorthe. (2014). Child protection systems within the Danish, Finnish and Norwegian welfare states—time for a child centric approach? *European Journal of Social Work*, 17(4), 475-490.
- Prime Minister's Office. (2015). *PM: We will not stand by – failing children's services will be taken over*. Retrieved from: <https://www.gov.uk/government/news/pm-we-will-not-stand-by-failing-childrens-services-will-be-taken-over>
- Primožič, Marjetica, & Bavec, Cene. (2009). Personal values and trust of Europeans in national and EU institutions. *Central European Public Administration Review*, 7(2), 7-25.
- Reamer, Frederic G. (1998). The evolution of social work ethics. *Social Work*, 43(6), 488-500.
- Reamer, Frederic G. (2013). *Social work values and ethics*. New York: Columbia University Press.
- Rogowski, Steve. (2012). Social work with children and families: Challenges and possibilities in the neo-liberal world. *British Journal of Social Work*, 42(5), 921-940.
- Rogowski, Steve. (2015). From child welfare to child protection/safeguarding: a critical practitioner's view of changing conceptions, policies and practice. *Practice*, 27(2), 97-112.
- Rosen, Aaron. (1994). Knowledge use in direct practice. *Social Service Review*, 68(4), 561-577.
- Rossiter, Amy, Prilleltensky, Isaac, & Walsh-Bowers, Richard. (2000). A postmodern perspective on professional ethics. In B. Fawcett, B. Featherstone, J. Fook, & A. Rossiter (Eds.), *Practice and Research in Social Work: Postmodern Feminist Perspectives* (pp. 83-103). London: Routledge.
- Saario, Sirpa, Räsänen, Jenni-Mari, Raitakari, Suvi, Banks, Sarah, & Juhila, Kirsi. (2018). Doing 'ethics work' together: negotiating service users' independence in community mental health meetings. *Ethics and Social Welfare*, 12(4), 370-386.
- Satka, Mirja, & Harrikari, Timo. (2008). The present Finnish formation of child welfare and history. *British Journal of Social Work*, 38(4), 645-661.
- Satka, Mirja, Harrikari, Timo, Hoikkala, Susanna, & Pekkarinen, Elina. (2007). The diverse impacts of the neo-liberal social policies on children's welfare and social work with young people: The Finnish perspective. *Social Work & Society*, 5(3), 125-135.

- Save the Children Finland. (2016). *Protecting children online: Children and digital media*, Save the Children Finland. Retrieved from https://s3-eu-west-1.amazonaws.com/pelastakaalapset/main/2016/04/15164111/nettivistihje_magazine1.pdf
- Shapira, Monica, & Benbenishty, Rami. (1993). Modeling judgments and decisions in cases of alleged child abuse and neglect. *Social Work Research and Abstracts*, 29(2), 14-19.
- Shardlow, Steven M, & Hämäläinen, Juha. (2015). Comparative social work. *Oxford Bibliographies*. doi:10.1093/obo/9780195389678-0193
- Shardlow, Steven M, & Payne, Malcolm. (1998). *Contemporary issues in social work: Western Europe*. Aldershot: Arena: Ashgate Publishing.
- Sheppard, Michael, & Ryan, Kate. (2003). Practitioners as rule using analysts: A further development of process knowledge in social work. *British Journal of Social Work*, 33(2), 157-176.
- Sinko, Päivi. (2008). *The new Child Welfare Act in Finland*. Retrieved from: <http://www.thetcj.org/in-residence/the-new-child-welfare-act-in-finland>
- Skivenes, Marit, & Tonheim, Milfrid. (2016). Improving the care order decision-making processes: viewpoints of child welfare workers in four countries. *Human Service Organizations: Management, Leadership & Governance*, 40(2), 107-117.
- Social Work England. (2019). *Launch date announced for specialist social work regulator*. Retrieved from <https://socialworkengland.org.uk/launch-date-announced-for-specialist-social-work-regulator/>.
- Social Work Task Force. (2009). *Building a safe, confident future: The final report of the Social Work Task Force November 2009*. Retrieved from <http://dera.ioe.ac.uk/10625/1/01114-2009DOM-EN.pdf>
- Soydan, Haluk. (1995). A cross-cultural comparison of how social workers in Sweden and England assess a migrant family. *International Journal of Social Welfare*, 4(2), 85-93.
- Soydan, Haluk, & Stål, Rolf. (1994). How to use the vignette technique in cross-cultural social work research. *International Journal of Social Welfare*, 3(2), 75-80.
- Spratt, Trevor. (2000). Decision making by senior social workers at point of first referral. *British Journal of Social Work*, 30(5), 597-618.
- Spratt, Trevor, & Callan, Jackie. (2004). Parents' views on social work interventions in child welfare cases. *British Journal of Social Work*, 34(2), 199-224.

- Stafford, Anne, Vincent, Sharon, Parton, Nigel, & Smith, Connie. (2012). *Child protection systems in the United Kingdom: A comparative analysis*. London: Jessica Kingsley Publishers.
- Stalker, Kirsten. (2003). Managing risk and uncertainty in social work: A literature review. *Journal of Social Work*, 3(2), 211-233.
- Stanford, Sonya. (2010). 'Speaking back' to fear: Responding to the moral dilemmas of risk in social work practice. *British Journal of Social Work*, 40(4), 1065-1080.
- Stebbins, Robert A. (2001). *Exploratory research in the social sciences*. London: Sage.
- Stokes, Jacqueline, & Schmidt, Glen. (2012). Child protection decision making: A factorial analysis using case vignettes. *Social Work*, 57(1), 83-90.
- Strauss, Anselm, & Corbin, Juliet. (1990). *Basics of qualitative research: grounded theory procedures and techniques*. London: Sage.
- Talentia. (2007). *Work, values, life, ethics: ethical guidelines for social welfare professionals*. Helsinki: Talentia Union of Professional Social Workers.
- Talentia. (2017). *Arki, arvot ja etiikka: Sosiaalialan ammattihenkilön eettiset ohjeet [Ethical guidelines for social workers]*. Helsinki: Talentia Union of Professional Social Workers Retrieved from https://talentia.e-julkaisu.com/2017/eettiset-ohjeet/docs/Talentia_Etiikkaopas_2017.pdf.
- Talentia. (n.d.). *Membership*. Retrieved from: <https://www.talentia.fi/en/membership/>
- Tanninen, Hanna-Mari. (2015). *Resource-enhancing nursing at home for families with small children: evaluation of early interventions*. University of Eastern Finland, Kuopio.
- Taylor, Brian J. (2006). Factorial surveys: Using vignettes to study professional judgement. *British Journal of Social Work*, 1187-1207.
- Taylor, Brian J. (2016). Heuristics in professional judgement: A psycho-social rationality model. *British Journal of Social Work*, 47(4), 1043-1060.
- Taylor, Brian J. (2017). *Decision making, assessment and risk in social work*. London: SAGE Publications.
- Taylor, Brian J, & Devine, Toni. (1993). *Assessing needs and planning care in social work*. Aldershot: Ashgate.
- Thaler, Richard H., & Sunstein, Cass R. (2009). *Nudge: Improving decisions about health, wealth and happiness*. London: Penguin.
- Timms, Noel. (1983). *Social work values: An enquiry*. London: Routledge.
- Törrönen, Maritta, Vornanen, Riitta, & Saurama, Erja. (2016). Out-of-home care for children and young people in Finland. In Tuhinul Islam & Leon Fulcher (Eds.), *Residential*

- child and youth care in a developing world: Global perspectives 1* (pp. 247-265). Cape Town: The CYC-Net Press.
- Tronto, Joan C. (1993). *Moral boundaries: A political argument for an ethic of care*. New York: Routledge.
- UNICEF Office of Research. (2013). *Child well-being in rich countries: A comparative overview*. Retrieved from: https://www.unicef-irc.org/publications/pdf/rc11_eng.pdf
- United Nations. (1989). United Nations convention on the rights of the child.
- University of Bergen. (2012). *Legitimacy and fallibility in child welfare services*. Retrieved from: <http://www.uib.no/en/node/38063>
- Valvira. (n.d.). *Professional practice rights for social welfare professionals*. Retrieved from: https://www.valvira.fi/en/web/en/social_welfare/professional-practice-rights-for-social-welfare-professionals
- van de Luitgaarden, Guido MJ. (2009). Evidence-based practice in social work: Lessons from judgment and decision-making theory. *British Journal of Social Work*, 39(2), 243-260.
- van de Luitgaarden, Guido MJ. (2011). Contextualizing judgements and decisions in child protection practice at the point of first referral. *Journal of Social Intervention: Theory and Practice*, 20(3), 24-40.
- van Nijmegen, Carolus, van den Ackerveken, Marielle, & Ewals, Tinus. (2004). Managing assessment. Quality planning in assessment procedures of the Dutch Child Protection Board. *British Journal of Social Work*, 34(4), 531-540.
- Vornanen, Riitta, Hämäläinen, Juha, & Pölkki, Pirjo. (2011). Influences of the economic recession and hardship on child welfare policy and practice in Finland. *Dialogue in Praxis*, 13(21), 7-22.
- Vornanen, Riitta, Pölkki, Pirjo, Pohjanpalo, Heidi, & Miettinen, Janissa. (2011). The possibilities for effective child protection—The Finnish research perspective. *ERIS Web Journal*, 1, 33-53.
- Vornanen, Riitta, Törrönen, Maritta, Lähteinen, Sanna, & Pohjola, Anneli. (2007). Professional postgraduate studies in social work: The Finnish example and European challenges. In Elizabeth Frost, Maria José Freitas, & Annamaria Campanini (Eds.), *Social work education in Europe* (pp. 117-130). Rome: Carocci.
- Warner, Joanne. (2014). 'Heads must roll'? Emotional politics, the press and the death of Baby P. *British Journal of Social Work*, 44(6), 1637-1653.
- Warner, Joanne. (2015). *The emotional politics of social work and child protection*. Bristol: Policy Press.

- Wasserman, Danuta, Cheng, QI, & Jiang, Guo-Xin. (2005). Global suicide rates among young people aged 15-19. *World Psychiatry*, 4(2), 114.
- Webb, Stephen A. (2006). *Social work in a risk society: Social and political perspectives*. Basingstoke: Palgrave Macmillan.
- Weiss-Gal, Idit, & Welbourne, Penelope. (2008). The professionalisation of social work: a cross-national exploration. *International Journal of Social Welfare*, 17(4), 281-290.
- Welbourne, Penelope. (2014). Time is of the essence: risk and the Public Law Outline, judicial discretion and the determination of a child's best interests. *Social Sciences*, 3(3), 584-605.
- Whittaker, Andrew. (2011). Social defences and organisational culture in a local authority child protection setting: challenges for the Munro Review? *Journal of Social Work Practice*, 25(4), 481-495.
- Wilberforce, Mark, Jacobs, Sally, Challis, David, Manthorpe, Jill, Stevens, Martin, Jasper, Rowan, . . . Netten, Ann. (2014). Revisiting the causes of stress in social work: Sources of job demands, control and support in personalised adult social care. *British Journal of Social Work*, 44(4), 812-830.
- Wilkins, David. (2015). Balancing risk and protective factors: How do social workers and social work managers analyse referrals that may indicate children are at risk of significant harm? *British Journal of Social Work*, 45(1), 395-411.
- Wilkins, David, & Antonopoulou, Vivi. (2018). What does supervision help with? A survey of 315 social workers in the UK. *Practice*, 31(1), 21-40.
- Wilkins, David, Forrester, Donald, & Grant, Louise. (2017). What happens in child and family social work supervision? *Child & Family Social Work*, 22(2), 942-951.
- Wilks, Tom. (2004). The use of vignettes in qualitative research into social work values. *Qualitative Social Work*, 3(1), 78-87.
- Williams, Charlotte, & Soydan, Haluk. (2005). When and how does ethnicity matter? A cross-national study of social work responses to ethnicity in child protection cases. *British Journal of Social Work*, 35(6), 901-920.
- Witkin, Stanley. (2000). Editorial: Ethics-R-Us. *Social Work*, 45(3), 197-200.
- Witkin, Stanley. (2011). *Social construction and social work practice: Interpretations and innovations*. New York: Columbia University Press.
- Yle. (2014, 12 May). Valvira: Up to 160 clients per child welfare employee. Retrieved from https://yle.fi/uutiset/osasto/news/valvira_up_to_160_clients_per_child_welfare_employee/7235079

Appendix 1

Empirical literature search

1. Research questions

In line with the review protocol which was developed and adapted from EPPI-Centre (2010) methods, different research questions were developed to guide the literature search related to each of the three broad subject areas of the review:

- i) Social work judgement and decision-making
 - What factors are considered by social workers when enacting professional judgement and making decisions in practice?
- ii) Social work ethics and values
 - What is the evidence regarding how ethics and values impact social work practice?
- iii) Comparative research in child welfare/child protection, with specific reference to England and Finland
 - What are the features of child welfare and/or child protection social work practice in England and Finland?

2. Search terms

Search terms were chosen related to each of the three subject areas of the review.

Truncation and Boolean operators were used:

- i) Social work judgement and decision-making

(“social work*” AND “decision-making” OR decision* OR judg*
AND assess* OR “risk assess*” OR screen* OR referral* OR
notification*)

ii) Social work ethics and values

(“social work*” AND ethic OR “professional ethic*” OR dilemma*
OR valu* OR moral* OR principle*)

iii) Comparative research in child welfare/child protection, with specific
reference to England and Finland

(“social work*” AND “compara*” OR cross-nation* OR “cross
nation*” AND "child welfare" OR "child protection" OR safeguard*
AND Engl* OR UK OR "United Kingdom" OR Britain OR Finland
OR Finnish)

3. Inclusion and exclusion criteria

The following inclusion and exclusion criteria were applied to each of the three
review subject areas:

i) Social work judgement and decision-making

	Included	Excluded
Type of study	Empirical research (any research design).	Non-empirical research.
Peer review status	Peer reviewed.	Not peer reviewed.
Publication date	Published after 1980.	Published before 1980.
Language	English language.	Non-English language.
Location	All locations.	N/A

Participants	Qualified social workers or qualified social workers and other groups.	No qualified social workers. For example, student social workers; social work managers or other professionals only.
Phenomena of interest	Research with a primary focus on social work judgement and decision making in the broad sense.	Research with a lack of primary focus on social work judgement and decision making.
Context	Concerning social work practice (this may include practice involving other professionals), in particular, practice involving assessment or responding to referrals/notifications.	Little relevance to social work practice and not related to assessment or responding to referrals/notifications

ii) Social work ethics

	Included	Excluded
Type of study	Empirical research (any research design).	Non-empirical research.
Peer review status	Peer reviewed.	Not peer reviewed.
Publication date	Published after 1980.	Published before 1980.
Language	English language.	Non-English language.
Location	All locations.	N/A
Participants	Qualified social workers or qualified social workers and other groups (for example,	No qualified social workers involved. For example, only student social workers, social

	student social workers).	work managers or other professionals.
Phenomena of interest	Research with a primary focus on understandings of social work ethics (in the broad sense, not just professional ethics) and/or values within practice.	Research with a lack of primary focus on ethics or values.
Context	Concerning social work practice (this may include practice involving other professionals).	Little relevance to social work practice.

- iii) Comparative research in child welfare/child protection, with specific reference to England and Finland

	Included	Excluded
Type of study	Empirical research (any research design).	Non-empirical research.
Peer review status	Peer reviewed.	Not peer reviewed.
Publication date	Published after 1980.	Published before 1980.
Language	English language.	Non-English language.
Location	A comparison of England or the UK as a whole and any other country/countries OR a comparison of Finland and any other country/countries.	Comparative studies not relating to England, the UK or Finland. Any non-comparative studies.
Participants	Qualified social workers or qualified social workers and other groups.	No qualified social workers. For example, student social workers; social work

		managers or other professionals only.
Phenomena of interest	Research with a primary focus on child welfare or child protection social work practice.	Research with a lack of primary focus on child welfare or child protection social work practice.
Context	Concerning social work practice only, in particular concerning referrals/notifications and decision making.	Not concerning social work practice.

Appendix 2

Confirmation of ethical approval (4th March 2016)

4th March 2016

Dear Rachel,

Re: A comparative analysis of child protection decision making in England and Finland

Thank you for submitting your revised application for review.

I am pleased to inform you that your application has been approved by the Ethics Review Panel. The following documents have been reviewed and approved by the panel as follows:

Document(s)	Version Number	Date
Summary Document	1	12-01-2016
Cover Letter	1	12-01-2016
Abstract	1	12-01-2016
Information Sheet – Agencies	2	23-02-2016
Information Sheet – Participants	2	23-02-2016
Consent Form & Consent Form for the use of quotes - Agencies	2	23-02-2016
Consent Form & Consent Form for the use of quotes - Participants	2	23-02-2016
Questionnaire	1	12-01-2016
Case Scenarios	1	12-01-2016
Interview Guide	1	12-01-2016

If the fieldwork goes beyond the date stated in your application (25th January 2018), you must notify the Ethical Review Panel via the ERP administrator at research.erps@keele.ac.uk stating ERP2 in the subject line of the e-mail.

If there are any other amendments to your study you must submit an 'application to amend study' form to the ERP administrator stating ERP2 in the subject line of the e-mail. This form is available via <http://www.keele.ac.uk/researchsupport/researchethics/>.

If you have any queries, please do not hesitate to contact me via the ERP administrator on research.erps@keele.ac.uk stating ERP2 in the subject line of the e-mail.

Updated ethical approval (13th July 2016)

13th July 2016

Dear Rachel,

Re: A comparative analysis of child protection decision making in England and Finland

Thank you for submitting your application to amend study, informing us of changes to your Questionnaire and Interview Topic Guide. I am pleased to inform you that your application has been approved by the Ethical Review Panel. The following documents have been reviewed and approved by the Panel as follows:-

Document	Version	Date
Questionnaire	2	04-07-2016
Interview Topic Guide	2	04-07-2016

If the fieldwork goes beyond the date stated in your application, **25th January 2018**, or there are any other amendments to your study you must submit an 'application to amend study' form to the ERP administrator at research.erps@keele.ac.uk stating **ERP2** in the subject line of the e-mail. This form is available via <http://www.keele.ac.uk/researchsupport/researchethics/>

If you have any queries, please do not hesitate to contact me via the ERP administrator on research.erps@keele.ac.uk stating **ERP2** in the subject line of the e-mail.

Updated ethical approval (21st July 2016)

21st July 2016

Dear Rachel,

Re: A comparative analysis of child protection decision making in England and Finland

Thank you for submitting your application to amend study (Amendment 2 20th July 2016), informing us of changes to your Information sheets and Consent forms. I am pleased to inform you that your application has been approved by the Ethical Review Panel. The following documents have been reviewed and approved by the Panel as follows:-

Document	Version	Date
Information Sheet, Consent Form and Consent for the use of quotes – for agencies	3	20-07-2016
Information Sheets, Consent Form and Consent for the use of quotes – for participants	3	20-07-2016

If the fieldwork goes beyond the date stated in your application, **25th January 2018**, or there are any other amendments to your study you must submit an 'application to amend study' form to the ERP administrator at research.erps@keele.ac.uk stating **ERP2** in the subject line of the e-mail. This form is available via <http://www.keele.ac.uk/researchsupport/researchethics/>

If you have any queries, please do not hesitate to contact me via the ERP administrator on research.erps@keele.ac.uk stating **ERP2** in the subject line of the e-mail.

Appendix 3

Interview invitation (covering letter)

Dear [Name of contact],

I am writing to you about an opportunity for professional social workers in your area to participate in a research study titled: '*A comparative analysis of child protection decision making in England and Finland*'. This study is being undertaken as part of my PhD in Social Work at Keele University. The research aims to compare how social workers make child protection decisions in England and Finland, to explore what factors (if any) may be influencing differences in decision making processes.

In your role as [professional role], I would be grateful if you could consider disseminating information about this study, and invitations to participate, to social workers responsible for responding to child protection referrals in your area.

If you require any further information about the study, or if there are any additional processes for gaining approval for the research in [name of local authority/municipality], please do not hesitate to contact me. Please note, no local authorities or municipal districts will be named in the final report.

Thank you in advance for your help and assistance. Please get in touch you have any questions.

Yours sincerely,

Rachel Falconer
PhD Candidate
School of Social Science & Public Policy
Keele University
r.l.falconer@keele.ac.uk

Version No: 1
Date: 12/01/2016

Interview invitation (covering letter Finnish)

Hyvä *xxx*

Olen sosiaalityön tohtorikoulutettava Keelen yliopistossa Britanniassa. Haluaisin haastatella lastensuojelussa työskenteleviä sosiaalityöntekijöitä kunnassanne. Haastattelussa kerätään aineistoa väitöskirjatutkimukseeni.

Tutkimusprojektini on vertaileva analyysi lastensuojelun päätöksenteosta Englannissa ja Suomessa. Osana projektia teen yhteistyötä Itä-Suomen yliopiston tutkijoiden kanssa.

Pyrin vertailevassa tutkimuksessani tarkastelemaan kahta lähestymistapaa lasten ja perheiden hyvinvointiin ja niiden vaikutuksia lastensuojelujärjestelmiin Englannissa ja Suomessa. Käytän tutkimukseni aineistona lastensuojelussa työskentelevien haastatteluja, jotka olen strukturoinut kahden tapausesimerkin avulla.

Toivon löytäväni otoksen lastensuojelussa työskentelevistä sosiaalityöntekijöistä, jotka ovat halukkaita osallistumaan 30 minuutin haastatteluun. Olen tutkimustani varten suorittanut alustavia esihaastatteluja sekä Englannissa että Suomessa, ja nyt pyrin laajentamaan otostani Suomessa lokakuussa ja joulukuussa 2016. Keelen yliopisto on myöntänyt täyden eettisen suostumuksen tutkimukselleni 4.3.2016. Tutkimuksen ohjaajina Keelen yliopistossa toimivat professori Steven Shardlow ja Emma Head.

Oheen olen liittänyt taustatietoja tutkimuksesta mukaanlukien abstrakti sekä toimipisteille sekä osallistujille välitettävä informaatiolomake.

Mikäli teillä on kysyttävää projektista, voitte vastata suoraan tähän sähköpostisoitteeseen tai soittaa numeroon +44 77XXXX XXXX.

Kiitos jo etukäteen avustanne, ja toivon kuulevani teistä pian.

Ystävällisin terveisin,

Rachel Falconer
PhD Candidate
School of Social Science & Public Policy
Keele University

Appendix 4

Interview invitation (study abstract)

Rachel Falconer, PhD candidate
School of Social Science & Public Policy
Keele University, UK
r.l.falconer@keele.ac.uk

Supervisor: Professor Steven M. Shardlow

Project title: A comparative analysis of child protection decision making in England and Finland.

Abstract:

This study will explore how social workers in England and Finland make child protection decisions. Despite developments in comparative research around child protection systems, few studies have considered the role of culture and politics in shaping professional judgements. Comparing practice in England and Finland will provide an insight into how national welfare context influences deliberation and the decision process.

The research design for this study is separated into two stages. Stage one includes a systematic review of empirical literature based on adapted methods from the Evidence for Policy and Practice Information and Coordinating Centre (EPPI-Centre). Stage two comprises a two site qualitative data collection exercise, based on interviews with social workers in England (n = 15) and Finland (n = 15), structured around case vignettes.

The study aims to examine the claim that practice challenges in England stem from its 'child protection' orientated system, which contrasts with the 'family service' approach of many European countries, including Finland. With suggestions that international child welfare policies have begun to converge, in part due to welfare restructuring, it is anticipated that how practitioners approach decision making may be changing. It is possible that resource pressures combined with increased managerialism and reduced discretion may be impacting the extent to which social workers are able to critically reflect upon complex dilemmas.

The research will have direct applications to policy and practice as findings will further understanding of child protection decision making and the role of political, social and cultural context in this. The research will build upon existing comparative methodologies, supported by a systematic review based on internationally recognised standards.

Interview invitation (study abstract Finnish)

Rachel Falconer, PhD candidate
School of Social Science & Public Policy
Keele University, UK
r.l.falconer@keele.ac.uk

Ohjaaja: Professori Steven M. Shardlow

Projektin nimi: Vertaileva analyysi lastensuojelun päätöksenteosta Englannissa ja Suomessa

Abstrakti:

Tutkimus tarkastelee sosiaalityöntekijöiden lastensuojeluun liittyvää päätöksentekoa Englannissa ja Suomessa. Vaikka vertailevaa tutkimusta lastensuojelusta on tehty aiemminkin, vain harva tutkimuksista on keskittynyt kulttuurin ja politiikan vaikutukseen ammatillisessa päätöksenteossa. Englannin ja Suomen käytäntöjä verratessa lisätään ymmärrystä siitä, kuinka kansallinen hyvinvointikonteksti vaikuttaa harkintaan ja päätöksentekoprosessiin.

Tutkimusasetelma on projektissa erotettu kahteen vaiheeseen. Ensimmäinen vaihe sisältää systemaattisen katsauksen empiiriseen kirjallisuuteen, minkä menetit pohjautuvat näyttöön perustuvaan lähestymistapaan (The Evidence for Policy and Practice Information and Coordinating Centre, EPPI-Centre). Toinen vaihe koostuu kaksiosaisesta, kvalitatiivisesta aineistonkeruusta, joka pohjautuu sosiaalityöntekijöiden haastatteluihin Englannissa (n=15) ja Suomessa (n=15). Haastattelut toteutetaan kahden tapausesimerkin (case vignette) avulla.

Tutkimuksessa tarkastellaan väitettä, jonka mukaan käytännön haasteet Englannissa pohjautuvat sen 'lastensuojelu'-suuntautuneeseen järjestelmään, mikä eroaa 'perhepalvelu'-lähestymistavasta, joka on tyypillinen monissa Euroopan maissa, kuten Suomessa. Väitettäessä, että kansainväliset lasten hyvinvointiin ja lapsipolitiikkaan linjaukset ovat samankaltaistumassa osana hyvinvointijärjestelmiä, oletetaan, että ammatinharjoittajien lähestymistavat päätöksentekoon saattavat olla muuttumassa. On mahdollista, että resurssipaineet yhdistettynä lisääntyneeseen managerialismiin ja vähentyneeseen harkintavaltaan saattavat vaikuttaa siihen, miten sosiaalityöntekijät voivat kriittisesti reflektoida monimutkaisia ja eettisesti vaativia ongelmia.

Tutkimus tarjoaa sovelluksia politiikkaan ja käytäntöön. Tulokset auttavat ymmärtämään lastensuojelun päätöksentekoa osana poliittista, sosiaalista ja kulttuurista kontekstia. Tutkimuksessa käytetään vertailevaa metodologiaa, jota tuetaan systemaattisella kansainvälisesti tunnettujen standardien mukaisella kirjallisuuskatsauksella.

Appendix 5

Study information sheet (for agencies)

INFORMATION SHEET

Study Title: *A comparative analysis of child protection decision making in England and Finland.*

Invitation

Qualified social workers in your organisation are being invited to consider taking part in the research study, '*A comparative analysis of child protection decision making in England and Finland*'. This project is being undertaken by Rachel Falconer, PhD candidate in the School of Social Science & Public Policy, Keele University, UK.

Before your organisation and its social workers decide whether or not they wish to take part, it is important for you to understand why this research is being done and what it will involve. Please take time to read this information carefully and discuss it with friends and relatives if you wish. Please ask if there is anything that is unclear or if you would like more information.

Aims of the Research

This research aims to compare the processes of decision making in child protection social work in England and Finland. Specifically, the project aims to answer the following questions:

1. How do social workers in England and Finland make child protection decisions?
2. (If differences are observed between and within sites in England and Finland) What factors may be influencing these differences?

Why have social workers from my organisation been invited?

Social workers from your organisation have been invited to participate in this research as their role involves professional decision making relating to child welfare and child protection. Qualified social workers from two to three local authority and municipality teams in England and Finland have been approached. Approximately 15 social workers from each country will participate in the main study.

Do social workers from my organisation have to take part?

Social workers from your organisation are free to decide whether they wish to take part or not. If they do decide to take part they will be asked to read and sign consent forms relating to their participation in the study and their agreement for quotes to be used.

Participants are free to withdraw from this study at any time up until the date of thesis submission and without giving reasons. This can be done by contacting the researcher, Rachel Falconer at r.l.falconer@keele.ac.uk. If participants choose to withdraw from the study, their interview data and all information relating to them will be permanently deleted

from all electronic and hard copy records. Their decision to withdraw will not be communicated to your organisation.

What will happen if social workers from my organisation take part?

Participants will be asked to complete a short questionnaire and take part in an interview which will last around 30 minutes. This will take place in a private room at their place of work.

Participants will first be asked to complete a short questionnaire which will include some questions about their professional background. They will then be asked to read two case scenarios and will be asked about the issues in each case, and how the child and family could be supported. Following this, they will be asked questions about the type of work they undertake personally, and how work is organised in your local authority/municipality. The interview will be recorded.

What are the benefits (if any) of taking part?

By participating in this study, social workers from your organisation will contribute to a growing body of comparative social work research which has explored how different welfare and child protection systems shape local practice. They will be provided with an overview of the research findings and will have the opportunity to learn more about social work practice in another national context. This will help to demonstrate their commitment to on-going learning and continuing professional development.

What are the risks (if any) of taking part?

As part of this study, participants will be presented with two case scenarios which will include child welfare/child protection issues. It is possible that they may be affected by the issues in the scenarios and as such, on the day of the interview they will be provided with information about local support services.

Participants' personal contact details will be kept securely in a confidential, password protected document. Their questionnaire data and interview recording/transcript will be assigned a participant number. All data analysis and research findings will refer to participant numbers only, for example, "English participants 1 and 3 discussed...". This will help to enhance participants' anonymity in the final report. Additionally, any identifiable information disclosed during interviews (for example, the names of agencies or individuals) will be anonymised in transcripts, analyses and the final report.

How will information about participants be used?

Participants' data will be collected and used for this study and in connection with academic papers associated with this study, and will not be retained for use in future research.

Who will have access to information about participants?

Participants contact details will be stored securely in a password protected document. Their questionnaire and interview responses will be given a participant number, and so their responses will only be identifiable if combined with the above password protected document. Only the principal researcher, Rachel Falconer, and the project supervisors will have access to the data. Once the study is completed (this is expected to be in 2018) all personal contact details of participants will be permanently deleted.

Please note, the researcher is required to work within the confines of current legislation over such matters as privacy and confidentiality, data protection and human rights. Therefore it may be necessary for offers of confidentiality to be overridden by law or professional

obligations. For example, in circumstances where the researcher is concerned over any actual or potential harm to the participant or others, they must pass this information to the relevant authorities.

Who is funding and organising the research?

This research is funded through Keele University's Humanities and Social Sciences Faculty Studentship.

What if there is a problem?

If you have a concern about any aspect of this study, you may wish to speak to the researcher who will do their best to answer your questions. You should contact Rachel Falconer at: r.l.falconer@keele.ac.uk. Alternatively, if you do not wish to contact the researcher you may contact the project supervisor, Professor Steven Shardlow at: s.m.shardlow@keele.ac.uk.

Appendix 6

Study information sheet (for participants)

INFORMATION SHEET

Study Title: *A comparative analysis of child protection decision making in England and Finland.*

Invitation

You are being invited to consider taking part in the research study, '*A comparative analysis of child protection decision making in England and Finland*'. This project is being undertaken by Rachel Falconer, PhD candidate in the School of Social Science & Public Policy, Keele University, UK.

Before you decide whether or not you wish to take part, it is important for you to understand why this research is being done and what it will involve. Please take time to read this information carefully and discuss it with friends and relatives if you wish. Please ask if there is anything that is unclear or if you would like more information.

Aims of the Research

This research aims to compare the processes of decision making in child protection social work in England and Finland. Specifically, the project aims to answer the following questions:

1. How do social workers in England and Finland make child protection decisions?
2. (If differences are observed between and within sites in England and Finland) What factors may be influencing these differences?

Why have I been invited?

You have been invited to participate in this research as your role involves professional decision making relating to child welfare and child protection. Qualified social workers from two to three local authority/municipality teams in England and Finland have been approached. Approximately 15 social workers from each country will participate in the main study.

Do I have to take part?

You are free to decide whether you wish to take part or not. If you do decide to take part you will be asked to read and sign consent forms relating to your participation in the study and your agreement for quotes to be used.

You are free to withdraw from this study at any time up until the date of thesis submission and without giving reasons. This can be done by contacting the researcher, Rachel Falconer at r.l.falconer@keele.ac.uk. If you choose to withdraw from the study, your interview data and all information relating to you will be permanently deleted from all electronic and hard copy records. Your decision to withdraw will not be communicated to your employer.

What will happen if I take part?

You will be asked to complete a short questionnaire and take part in an interview which will last around 30 minutes. This will take place in a private room at your place of work.

You will first be asked to complete a short questionnaire which will include some questions about your professional background. You will then be asked to read two case scenarios and will be asked about the issues in each case, and how the child and family could be supported. Following this, you will be asked questions about the type of work you undertake personally, and how work is organised in your local authority/municipality. The interview will be recorded.

What are the benefits (if any) of taking part?

Your involvement in this study will contribute to a growing body of comparative social work research which has explored how different welfare and child protection systems shape local practice. You will be provided with an overview of the research findings and will have the opportunity to learn more about social work practice in another national context. This will help to demonstrate your commitment to on-going learning and continuing professional development.

What are the risks (if any) of taking part?

As part of this study, you will be presented with two case scenarios which will include child welfare/child protection issues. It is possible that you may be affected by the issues in the scenarios and as such, on the day of the interview you will be provided with information about local support services.

Your personal contact details will be kept securely in a confidential, password protected document. Your questionnaire data and interview recording/transcript will be assigned a participant number. All data analysis and research findings will refer to participant numbers only, for example, "English participants 1 and 3 discussed..." This will help to enhance your anonymity in the final report. Additionally, any identifiable information disclosed during interviews will be anonymised in transcripts, analyses and the final report.

How will information about me be used?

Your data will be collected and used for this study and in connection with academic papers associated with this study, and will not be retained for use in future research.

Who will have access to information about me?

Your personal contact details will be stored securely in a password protected document. Your questionnaire and interview responses will be given a participant number, and so your responses will only be identifiable if combined with the above password protected document. Only the principal researcher, Rachel Falconer, and the project supervisors will have access to the data. Once the study is completed (this is expected to be in 2018) all personal data of participants will be permanently deleted.

Please note, the researcher is required to work within the confines of current legislation over such matters as privacy and confidentiality, data protection and human rights. Therefore it may be necessary for offers of confidentiality to be overridden by law or professional obligations. For example, in circumstances where the researcher is concerned over any actual or potential harm to yourself or others, they must pass this information to the relevant authorities.

Who is funding and organising the research?

This research is funded through Keele University's Humanities and Social Sciences Faculty Studentship.

What if there is a problem?

If you have a concern about any aspect of this study, you may wish to speak to the researcher who will do their best to answer your questions. You should contact Rachel Falconer at: r.l.falconer@keele.ac.uk. Alternatively, if you do not wish to contact the researcher you may contact the project supervisor, Professor Steven Shardlow at: s.m.shardlow@keele.ac.uk.

Study Information Sheet (for participants Finnish)

TIETOLOMAKE

Tutkimuksen nimi: Vertaileva analyysi lastensuojelun päätöksenteosta Englannissa ja Suomessa

Kutsu

Teidät on kutsuttu osallistumaan tutkimukseen 'Vertaileva analyysi lastensuojelun päätöksenteosta Englannissa ja Suomessa'. Projektista vastaa Rachel Falconer, tohtorikoulutettava Keelen yliopiston yhteiskuntatieteellisestä tiedekunnasta.

Ennen kuin teette päätöksen osallistumisestanne, on tärkeää, että ymmärrätte miksi tutkimus on käynnissä ja mitä osallistumiseen kuuluu. Pyydän lukemaan tämän informaatio-osion huolella sekä tarvittaessa keskustelemaan sen sisällöstä ystävien ja sukulaisten kanssa. Kysymyksiä kannattaa esittää, mikäli jokin asia jää epäselväksi tai tarvitsette lisätietoa.

Tutkimuksen tavoitteet

Tutkimus pyrkii vertaamaan lastensuojelun päätöksenteon prosesseja Englannissa ja Suomessa. Seuraavat kysymykset valottavat tarkemmin tutkimuksen tavoitteita:

1. Kuinka sosiaalityöntekijät Englannissa ja Suomessa tekevät lastensuojeluun liittyviä päätöksiä?
2. Mitkä tekijät vaikuttavat havaittuihin eroihin? (Mikäli eroavaisuuksia havaitaan)

Miksi minut on kutsuttu?

Teidät on kutsuttu osallistumaan tutkimukseen, koska roolinne ammatillisessa päätöksenteossa liittyy lastensuojeluun ja lasten hyvinvointiin. Tutkimuksessa on lähestytty päteviä sosiaalityöntekijöitä 2-3 paikallisesta toimipisteestä sekä Englannissa että Suomessa. Noin 15 sosiaalityöntekijää kummastakin maasta osallistuu päättötutkimukseen.

Onko osallistuminen pakollista?

Osallistuminen on täysin vapaaehtoista. Mikäli päätätte osallistua, teitä pyydetään lukemaan ja allekirjoittamaan suostumuslomakkeet, jotka liittyvät osallistumiseenne tutkimukseen sekä suostumukseenne lainausten käytössä.

Olette vapaa vetäytymään tutkimuksesta missä vaiheessa tahansa väitöskirjan palautuspäivämäärään asti ilman ilmoitettua syytä. Tämä tapahtuu ottamalla yhteyttä tutkijaan, Rachel Falconeriin, sähköpostitse osoitteeseen r.l.falconer@keele.ac.uk. Jos päätätte vetäytyä tutkimuksesta, haastattelumateriaalinne sekä muu tarjoamanne informaatio hävitetään kaikista elektronisista sekä kirjallisista tallenteista. Vetäytymispäätöstänne ei saateta työnantajanne tietoon.

Mitä tapahtuu, mikäli osallistun?

Teitä pyydetään täyttämään lyhyt kyselylomake sekä osallistumaan haastatteluun, joka kestää noin 30 minuuttia. Haastattelu tapahtuu työpaikallanne yksityisessä huoneessa.

Tapaamisen alussa teitä pyydetään täyttämään lyhyt kysely, joka sisältää kysymyksiä ammatillisesta taustastanne. Seuraavaksi teitä pyydetään lukemaan kaksi tapausesimerkkiä,

jonka jälkeen teiltä kysytään muutama kysymys tämänhetkisestä työnkuvastanne sekä nykyisen toimipisteenne toimintaperiaatteista ja työn organisoinnista. Haastattelu nauhoitetaan.

Kuinka hyödyn osallistumisestani?

Osallistumisenne tutkimukseen edistää vertailevaa sosiaalityön tutkimusta, joka keskittyy erilaisten hyvinvointi- sekä lastensuojelujärjestelmien vaikutukseen paikallisessa lastensuojelun toiminnassa. Teille tarjotaan yleisesitys tutkimustuloksista, ja saat mahdollisuuden oppia lisää käytännön sosiaalityöstä erilaisissa kansallisissa konteksteissa. Osallistumisenne osoittaa sitoutumistanne jatkuvaan oppimiseen sekä ammatilliseen kehitykseen.

Mitä riskejä osallistumisessani saattaa olla?

Osana tutkimusta teille esitetään kaksi tapausesimerkkiä lastensuojelussa. Esimerkit saattavat vaikuttaa teihin, minkä vuoksi haastattelupäivänä teille tarjotaan informaatiota paikallisista tukipalveluista.

Henkilökohtaiset yhteystietonne pidetään luottamuksellisesti salanasuojetussa asiakirjassa.

Kyselytutkimuksen data sekä haastattelunauhoitus merkitään osallistujanumerolla. Kaikki analyysi sekä tutkimustulokset viittavaat osallistujaan vain numeroin. Esimerkki: ”Englantilaiset osallistujat 1 ja 3 keskustelivat...”. Näin taataan anonymiteetti lopputuotoksessa. Lisäksi kaikki tunnistettava informaatio, jota tarjoatte haastattelussa, anonymisoidaan lopullisessa tuotoksessa.

Kuinka tarjoamaani informaatiota käytetään?

Antamaasi tietoa käytetään vain kyseessä olevaan tutkimukseen tai muihin akateemisiin tutkimuksiin, jotka ovat yhteydessä suoritettavaan projektiin. Tietoja ei säilytetä jatkotutkimuksia varten.

Kenellä on pääsy henkilökohtaisiin tietoihini?

Henkilökohtaiset yhteystietosi kirjataan asiakirjaan, jolla on salanasuojaus.

Kyselylomakkeesi sekä haastatteluvastauksesi ovat merkitty osallistujanumerolla, joten vastauksesi ovat tunnistettavissa ainoastaan, kun tiedot yhdistetään salanasuojattuun asiakirjaan. Ainoastaan päättäjällä, Rachel Falconerilla, sekä projektin ohjaajilla on pääsy asiakirjan tietoihin. Kun tutkimus on saatettu päätökseen (odotetusti vuonna 2018), kaikki henkilökohtaiset tiedot deletoidaan pysyvästi.

Pyydän ottamaan huomioon, että tutkijan odotetaan toimivan nykyisen lainsäädännön puitteissa koskien yksityisyyttä, luottamuksellisuutta, tietosuojasta sekä ihmisoikeuksia. Näin ollen on mahdollista, että lainsäädännölliset muutokset tai ammatilliset velvoitteet voivat vaikuttaa tietosujojaanne. Esimerkiksi tapauksessa, jossa tutkija on huolissaan osallistujan potentiaalista aiheuttaa vahinkoa joko sivullisille tai itselleen, on tilanteeseen sovellettava velvoitetta, jonka mukaan asianomaisille viranomaisille välitetään tietoa.

Kuka rahoittaa tutkimusta?

Keelen yliopiston *Humanities and Social Sciences Faculty Studentship* rahoittaa tutkimusta.

Ongelman ilmetessä

Jos olette huolissanne mistään tutkimukseen liittyvästä seikaista, voitte ottaa yhteyden tutkijaan, joka parhaansa mukaan pyrkii vastaamaan kysymyksiinne. Teidän tulisi ottaa yhteyttä Rachel Falconeriin osoitteeseen r.l.falconer@keele.ac.uk. Vaihtoehtoisesti voitte

ottaa myös yhteyden projektin ohjaajaan, professori Steven Shardlowiin osoitteeseen s.m.shardlow@keele.ac.uk.

Appendix 7

Consent form (for participation in the study)

Title of Project: *A comparative analysis of child protection decision making in England and Finland.*

Name and contact details of Principal Researcher:

Rachel Falconer

Claus Moser Research Centre, Keele University, Keele, Staffordshire, UK, ST5 5BG.

Email: r.l.falconer@keele.ac.uk

**Please tick box if you
agree with the statement**

1. I confirm that I have read and understood the information sheet dated 20/07/2016 (version no 3) for the above study and have had the opportunity to ask questions.	<input type="checkbox"/>
2. I understand that my participation is voluntary and that I am free to withdraw at any time up to submission of the thesis.	<input type="checkbox"/>
3. I agree to take part in this study.	<input type="checkbox"/>

Name of participant

Date

Signature

Researcher

Date

Signature

Consent form (for participation in the study) Finnish

SUOSTUMUSLOMAKE

Projektin nimi: Vertaileva analyysi lastensuojelun päätöksenteosta Englannissa ja Suomessa

Tutkijan nimi sekä yhteystiedot:

Rachel Falconer

Claus Moser Research Centre, Keele University, Keele, Staffordshire, UK, ST5 5BG.

Sähköposti: r.l.falconer@keele.ac.uk

Pyydän rastimaan ruudun, mikäli olet samaa mieltä esitetystä väittämästä.

4. Vahvistan, että olen lukenut sekä ymmärtänyt informaatiolomakkeen päivämäärällä 20/07/2016 (versio nro 3) liittyen yllämainittuun tutkimukseen ja minulle on tarjottu mahdollisuus kysyä kysymyksiä.	<input type="checkbox"/>
5. Ymmärrän, että osallistumiseni on vapaaehtoista, ja että olen vapaa vetäytymään tutkimuksesta missä kohdassa tahansa ennen väitöskirjan palautuspäivämäärää.	<input type="checkbox"/>
1. Annan suostumukseni tutkimukseen osallistumiselle.	<input type="checkbox"/>

Osallistujan nimi

Päivämäärä

Allekirjoitus

Tutkija

Päivämäärä

Allekirjoitus

Appendix 8

Consent form (for use of quotes)

Title of Project: *A comparative analysis of child protection decision making in England and Finland.*

Name and contact details of Principal Researcher:

Rachel Falconer

Claus Moser Research Centre, Keele University, Keele, Staffordshire, UK, ST5 5BG.

Email: r.l.falconer@keele.ac.uk

**Please tick box if you
agree with the statement**

1. I agree for my quotes to be used in this study and in connection with academic papers associated with this study (please note, your name and the name of your employer will be kept confidential).	<input type="checkbox"/>
2. I do not agree for my quotes to be used.	<input type="checkbox"/>

Name of participant

Date

Signature

Researcher

Date

Signature

Consent form (for use of quotes) Finnish

SUOSTUMUSLOMAKE (lainauksien käytöstä)

Projektin nimi: Vertaileva analyysi lastensuojelun päätöksenteosta Englannissa ja Suomessa

Tutkijan nimi sekä yhteystiedot:

Rachel Falconer

Claus Moser Research Centre, Keele University, Keele, Staffordshire, UK, ST5 5BG.

Sähköposti: r.l.falconer@keele.ac.uk

Pyydän rastimaan ruudun, mikäli olet samaa mieltä esitetystä väittämästä.

1. Annan suostumukseni lainata sanomaani tässä tutkimuksessa sekä akateemisissa julkaisuissa, jotka ovat yhteydessä tähän tutkimukseen (huomioikaa, että nimesi sekä työnantajasi säilyvät luottamuksellisena tietona).	<input type="checkbox"/>
2 En anna lupaa lainata sanomaani.	<input type="checkbox"/>

Osallistujan nimi

Päivämäärä

Allekirjoitus

Tutkija

Päivämäärä

Allekirjoitus

Appendix 9

Questionnaire

Study Title: *A comparative analysis of child protection decision-making in England and Finland.*

Name:	
Date of birth:	
Email address:	
Would you like to be contacted at this email address with a summary of the research findings? (please tick)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Date social work qualification obtained:	
Current employer and name of team:	
Employed as a social worker with your current employer since:	
Social work relevant positions with other employers (please state the job title and organisation):	
Social work relevant education:	

Questionnaire (Finnish)

KYSELYLOMAKE

Study Title: *A comparative analysis of child protection decision-making in England and Finland.*

Tutkimuksen nimi: *Vertaileva analyysi lastensuojelun päätöksenteosta Englannissa ja Suomessa*

Nimi:	
Syntymäaika:	
Sähköpostiosoite:	
Would you like to be contacted at this email address with a summary of the research findings? Haluatko antamaasi sähköpostiosoitteeseen tiivistelmän tutkimustuloksista? (valitse)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Date social work qualification obtained: Valmistumispäivämäärä (pätevyys sosiaalityössä):	
Current employer and name of team: Nykyinen työnantaja sekä yksikön sekä tiimin nimi:	
Employed as a social worker with your current employer since: Nykyisen työnantajan alaisuudessa alkaen (päivämäärä):	
Social work relevant positions with other employers (please state the job title and organisation): Muut sosiaalityön kannalta olennaiset työnantajat (työnimike sekä organisaatio):	
Koulutus (sosiaalityö):	

Appendix 10

Case vignettes

Case Scenario 1:

You receive a telephone call from Anna, an educational welfare officer in a local school. Anna informs you that she is concerned about one of the school's pupils, six-year-old Daniel, who recently told his teacher that he was tired because his mother, Kate, and her partner were arguing at night.

Daniel has been at the school for three months and Anna has met Daniel's mother Kate on four occasions. Kate approached Anna shortly after Daniel started at the school to ask if she could receive financial support from the school to buy furniture. The family receive welfare benefits and live in social housing. On another occasion, Kate appeared upset and told Anna that she previously had two children taken into care, although she was unwilling to say any more about this. The family do not have any relatives in the area.

Daniel has a sister, Emily, aged 18 months. Anna says that she has seen Emily three times (Anna does not know who was looking after Emily on one occasion). Emily is very quiet and small for her age. Emily does not attend day care.

Anna spoke to Kate about putting a support plan in place at the school, however Kate refused this. Kate said she did not want help with caring for the children, she only wanted financial assistance.

Anna has concerns about Daniel and Emily but has not told Kate that she has contacted social services. Anna feels that Kate and the children need support but she is worried that Kate may not accept any help.

Case scenario 2:

You receive a telephone call from a youth worker, Tom, who has concerns about the welfare of a 14-year-old boy, Sam, who attends his youth club.

Sam has mild learning difficulties and has recently started talking to other boys online. Tom informs you that Sam shared explicit photographs of himself with another boy, who Sam says is aged 16 (however they have not met in person). Sam had an argument with the boy who threatened to put the photographs online and spread them around Sam's school.

Sam is extremely upset and threatened to commit suicide if anyone finds out about the photographs or the fact he is gay, particularly his teachers and his parents. Sam has insisted

that Tom does not tell anyone about what has happened, however Tom felt he had a duty to report this to social services. Tom has not told Sam about the referral.

Case Vignettes (Finnish)

Tapausesimerkki 1:

Saatte puhelun Annalta, koulun sosiaalityöntekijältä. Anna kertoo, että hän on huolissaan eräästä koulun oppilaasta, 6-vuotiaasta Danielista, joka hetki sitten kertoi opettajalleen olevansa väsynyt, koska hänen äitinsä Kate oli riidellyt partnerinsa kanssa yöllä.

Daniel on käynyt koulua kolme kuukautta, ja Anna on tavannut Daniel äidin, Katen, neljä kertaa. Kate oli aiemmin lähestynyt Annaa kysyen neuvoa rahallisen tuen saamisesta koululta huonekalujen ostoa varten. Perhe toimeentulotukea, ja he asuvat tuetusti. Toisella kerralla Kate oli kertonut Annalle alakuloisen oloisena, että kaksi hänen aiempaa lastaan on otettu huostaan. Hän ei ollut halukas kertomaan enempää tapahtuneesta. Perheellä ei ole sukulaisia lähialueella.

Danielilla on sisko, Emily, joka on 1,5-vuotias. Anna sanoo nähneensä Emilyn kolme kertaa (Anna ei tiedä kuka vahti Emilyä yhdellä kerroista, kun hän oli tekemisissä Katen kanssa.) Emily on hyvin hiljainen ja pieni ikäisekseen. Emily ei käy päivähoitossa.

Anna puhui Katelle koulusta saatavasta tuesta, mutta Kate kieltäytyi osallistumasta. Kate sanoi ettei halua apua lastenhoitoon vaan pelkästään rahallista tukea.

Anna on huolissaan Danielista ja Emilystä mutta hän ei ole kertonut ottaneensa yhteyttä lastensuojeluviranomaisiin. Annasta tuntuu, että Kate ja lapset tarvitsevat tukea mutta pelkää, että Kate kieltäytyy tarjotusta avusta.

Tapausesimerkki 2:

Saatte puhelun nuorisotyöntekijältä, Tomilta, joka on huolissaan 14-vuotiaan Samin hyvinvoinnista. Sam osallistuu Tomin nuorisokerhoon.

Samilla on lieviä oppimisvaikeuksia, ja hän on viime aikoina alkanut puhua muille pojille netin välityksellä. Tom kertoo teille, että Sam on jakanut paljastavia kuvia itsestään toiselle pojalle, joka on Samin mukaan 16-vuotias (vaikkakaan he eivät ole tavanneet kasvotusten). Sam kertoi riitatilanteesta, jossa poika uhkasi julkaista Samin lähettämiä kuvia internetissä ja levittää niitä Samin koululla.

Sam on hyvin alakuloinen ja on uhannut itsemurhalla, mikäli kukaan saa selville kuvista tai siitä, että hän on homoseksuaali. Erityisesti hän on huolissaan siitä, että hänen vanhempansa tai opettajansa saisivat tietää. Sam on vaatinut, että Tom ei kerro kellekään tapahtuneesta, mutta Tom kokee, että hänellä oli velvollisuus ilmoittaa tapahtuneesta sosiaaliviranomaisille. Tom ei ole kertonut Samille lastensuojeluilmoituksesta.

Appendix 11

Interview guide

Preamble:

Thank you for agreeing to take part in this research. My name is Rachel Falconer and I am a PhD researcher at Keele University. I have a background in social work and my research aims to compare how child protection decisions are made in different welfare contexts, specifically in England and Finland.

The interview will last around 30 minutes and it will be recorded. Please take some time to read through the information sheet and please ask if you have any questions. If you are happy to continue, please sign the consent forms.

In terms of what you will be asked to do, I will first ask you to complete a short questionnaire. Following this, we will discuss the case studies and I will ask a few questions about the issues in each case. Finally, I will ask you some broader questions about your work.

If you have any questions during the interview or need to pause at any point, please do not hesitate to ask. Do you have any questions before we start?

Step 1 – Ask participants to complete questionnaire.

Step 2 – Ask participants to read case scenario 1.

Step 3 – Questions to be asked after reading case scenario 1:

1. As a professional social worker, what are the main issues or concerns for the child/ren in this case?
2. How serious are the presenting issues in this case?
3. What would your first steps be if you were asked to work on this case?

Step 4 – Ask participants to read case scenario 2.

Step 5 – Questions to be asked after reading case scenario 2:

1. As a professional social worker, what are the main issues or concerns for the child/ren in this case?
2. How serious are the presenting issues in this case?
3. What would your first steps be if you were asked to work on this case?

Step 6 – Additional questions:

1. Tell me about how new referrals/notifications are dealt with in your team?

2. How are decisions made on how to act following new referrals/notifications?
3. Tell me about the support services available to children and families in your area, which are aimed at preventing children from being taken into care.
4. Has your work in child welfare changed during your career as a social worker? If so, how?
5. What ethical issues impact the work of children's social workers in your country?
6. How do you deal with ethical issues in your work?

Debrief:

Thank you for your help and for participating in my study. As you may have noticed from the interview questions, in addition to decision-making, my study is also concerned with the topic of social work ethics. I am interested in how social workers in different contexts use and engage with ethical issues in their day-to-day practice, and whether organisational factors (for example, caseloads or supervision support) may have an impact on how social workers manage ethical dilemmas.

If you feel uncomfortable about anything we have talked about today, please do not hesitate to contact me or my supervisor if there is anything you would like to discuss. In addition, if you feel upset or distressed by anything we have discussed, you can contact the following support services in your area. *To be provided to each participant- this will depend on their location*

Once I have completed the study I will contact you again to provide you with a summary of the research findings. How would be best for me to contact you?

Do you have any questions about the research study?

Do you have any feedback on the interview process? Is there anything I could do to improve the experience? Is there anything else you think I should ask about?

Do you have any comments or views about how this research could be used to support social workers in your area?